MATERIAL REVIEWED AT CIA HEADQUARTERS BY
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

SECRET

FILE TITLE/NUMBER/VOLUME: Bustos-Videla, C. Z.

INCLUSIVE DATES: 14 Feb 1950 - 16 JAN 1978

CUSTODIAL UNIT/LOCATION: Office of Personnel

ROOM: 5E13

DELETIONS, IF ANY:

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

BUSTOSVIDELA C Z
SSN 069-24-3138
01/17/29

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 31 July 1973

1. SERIAL NUMBER	2. NAME (Last-First-Middle)
007667	Bustos-Videla, C~~harlotte~~ Z.

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE REQUESTED (MONTH / DAY / YEAR)	5. CATEGORY OF EMPLOYMENT
Reassignment	08 / 03 / 73	Regular

6. FUNDS				7. FAN AND NSCA	8. LEGAL AUTHORITY (Completed by Office of Personnel)
X	V TO V		V TO CF	4235-4525 0000	
	CF TO V		CF TO CF		

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDO/WH Division FI Staff	Washington, D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
OPS Officer (13)	0640	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 7	$ 23642

18. REMARKS

Home Base: WH

18A. SIGNATURE OF REQUESTING OFFICIAL	DATE SIGNED	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED
H. E. Berthold C/WH/Pers	31 Jul 73	[signature]	8-2-73

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING NUMERIC	ALPHABETIC	22. STATION CODE	23. INTEGREE CODE	24. HDQTRS CODE	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
39	10	51100	WH	75013		1	2 11 12 29		

28. NTE EXPIRES MO DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA (1—CSC 2—OTHER 3—FICA 4—NONE) CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA	33. SECURITY REQ NO	34. SEX

35. VET. PREFERENCE CODE (0—NONE 1—5 PT 2—10 PT)	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CAR/RESV PROV/TEMP CODE	39. FEGLI/HEALTH INSURANCE CODE (1—WAIVED 2—REG 3—REG/OPT 4—INELIGIBLE) HEALTH INS. CODE	40. SOCIAL SECURITY NO.

41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE (0—NO PREVIOUS SERVICE 1—NO BREAK IN SERVICE 2—BREAK IN SERVICE (LESS THAN 3 YEARS) 3—BREAK IN SERVICE (MORE THAN 3 YEARS))	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED (1—YES 2—NO) CODE, NO. TAX EXEMPTIONS	44. STATE TAX DATA FORM EXECUTED (1—YES 2—NO) CODE, NO. TAX EXEMP, STATE CODE

45. POSITION CONTROL CERTIFICATION	46. O.P. APPROVAL	DATE APPROVED
[initials] 8-3-73 AUG 3 1973	[signature]	8-7-73

FORM 8-72 1152 USE PREVIOUS EDITION

SECRET CLASSIFIED BY 07-0332 E2-2 IMPDET

SECRET
EYES ONLY

17 JAN 1973

MEMORANDUM FOR: Chairman, GS-13 Evaluation Board

SUBJECT : Recommendation for Promotion to GS-14 — Charlotte Bustos-Videla

1. It is recommended that Charlotte Bustos-Videla be promoted from GS-13 to GS-14.

2. The performance of this officer has been characterized for many years by all of her supervisors as consistently strong to outstanding. She has been able to establish herself as indispensable in each Headquarters Branch or Field Station assignment, usually functioning as the backbone of the unit to which assigned. Since return to Headquarters in September 1972 from her field assignment in Mexico, her performance has been entirely congruent with the thrust of the Field Station's enthusiasm over her ability, performance, attitude and growth potential. She is currently chief of the Cuban and CA Section of her branch, and has established once again her mastery over her assigned duties. She is the kind of sound, dependable, yet imaginative officer greatly appreciated by her supervisors. In short, she is a true professional who performs beyond her grade level.

3. In regard to her potential, she has served in the Agency since 1951, starting as a secretary/stenographer, and advancing brilliantly with each new challenge offered. She achieved professional status in 1953 and has spent the bulk of her time since then specializing in Latin American affairs, demonstrating total flexibility in assignments, a voracious appetite for work and a penchant for exceptionally precise and thorough production. A review of her career to date can lead to the conclusion that she has always risen successfully to each new professional challenge, and is still far from reaching her maximum capacities. While she has had little supervisory experience in the field, her supervisor was of the opinion that she is a "natural leader". This has been borne out in her performance in her current capacity as a Branch Section Chief, in which she has demonstrated exemplary supervisory ability. Notwithstanding her drive, aggressiveness and professional aplomb, she is a popular co-worker, is receptive to guidance and sensitive and responsive to the needs of her subordinates.

SECRET
EYES ONLY

4. This employee has utilized her fluency in the Spanish language to maximum advantage in her work. Formal testing recently confirmed her high proficiency in that language. Coupled with a comprehensive training record and her invaluable experiences over a twenty year period, she has become particularly effective in Latin American operations and operational support, demonstrating excellence in each of several recognized specializations, including CI operations, functional support, reports and requirements, area support and varied covert action activities.

5. The officer's adaptability, high intelligence and mastery over her trade was of inestimable value to Mexico City Station, and over a five year period from 1967 to 1972, she functioned as the Station's internal troubleshooter. Her duties included the maintenance of watchlists, screening of travel documents, processing of raw technical take, target analysis, reports writing, operational support, handling of outside contract agents, and special assignments as the Chief of Station's Executive Assistant.

6. The employee is occasionally called upon by the Office of Training to administer specialized training, and she was chosen recently to attend the Mid-Career Course ending in December 1972. Meanwhile, her absence from her new job is felt sorely by the Branch. It is expected that her current assignment will last about two years.

7. In summary, we have here an exceptional officer who has been performing at the level of a GS-14 for some years; it is now time to promote her to that grade commensurate with her performance and which she so justly deserves.

Theodore G. Shackley
Chief
Western HemisphereDivision

SECRET

MEMORANDUM FOR: Chairman, QSI - Honor and Merit Awards Panel

SUBJECT : Request for Quality Step Increase (HR 20-37)
Mrs. Charlotte Bustos-Videla

1. On the basis of the information presented below, it is recommended that a Quality Step Increase be approved for Charlotte Bustos-Videla.

2. As noted in the attached fitness report, Subject's performance of her duties has been uniformly outstanding. In addition to her responsibilities in the Cuban section of the Mexico City Station, she has recently been made the executive assistant to the Chief of Station at Mexico City. In this job, she screens all incoming material for matters of interest to the Chief and Deputy Chief of Station. She also continues performing her past functions in the Cuban section for the Station.

3. Subject's present high quality of performance is typical of her performance since she entered the Agency in 1951. It is fully expected that this level of performance will be maintained.

4. Although the present Chief of Station was not the reviewing official on the attached fitness report, he has commented that he considered Subject an outstanding officer and has recommended that she be considered for a Quality Step Increase.

William V. Broe
Chief
Western Hemisphere Division

SECRET

EYES ONLY
SECRET

16 MAR 1962

MEMORANDUM FOR: Secretary, CSCS Panel (Section A)

SUBJECT: Recommendation for Promotion to Grade GS-13
Charlotte Z. Bustos-Videla

1. The promotion of Charlotte Z. Bustos-Videla from GS-12 to GS-13 is hereby recommended.

2. This exceptional officer has now been performing at a senior level for several years and, while recognition through a Quality Step Increase was granted her last year, her sustained performance clearly exceeding the requirements of a GS-13 qualifies her for a promotion at this time. Subject is one of the outstanding women who have demonstrated their capacity for even further advancement within the Agency and will probably continue to advance in the future. The present recommendation is based on already demonstrated ability to operate at a senior level.

3. Subject is 36 years old and has been in grade as a GS-12 for the past five and one-half years.

R. W. Herbert
Desmond FitzGerald
Chief,
Western Hemisphere Division

EYES ONLY
SECRET

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 30 August 1972

1. SERIAL NUMBER: 007667
2. NAME (Last-First-Middle): Bustosvidela, C/ Z.
3. NATURE OF PERSONNEL ACTION: Reassignment and Transfer to Vouchered Funds
4. EFFECTIVE DATE REQUESTED: MONTH 09 DAY 17 YEAR 72
5. CATEGORY OF EMPLOYMENT: Regular
6. FUNDS: V TO V / V TO CF / X CF TO V / CF TO CF
7. FINANCIAL ANALYSIS NO. CHARGEABLE: 3235-0620 CCT
8. LEGAL AUTHORITY (Completed by Office of Personnel):
9. ORGANIZATIONAL DESIGNATIONS: DDP/WH Division, Branch 1, CA Section
10. LOCATION OF OFFICIAL STATION: Wash., D. C.
11. POSITION TITLE: Ops Officer (D-13)
12. POSITION NUMBER: 1294
13. CAREER SERVICE DESIGNATION: D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.): GS
15. OCCUPATIONAL SERIES: 0136.01
16. GRADE AND STEP: 13 7
17. SALARY OR RATE: $ 22,487

18. REMARKS

FROM: DDP/WH/BR 1/MEXICO CITY STATION/0418 *HOME BASE: WH

2 - Security
1 - Finance

Security Approval Granted by Pers. SD/OS 05 Sept 72

Issue Army W-2 (Concur: CCS [signature]) 25 SEP 1972

22 SEP 1972

E 2 IMPDET
CL BY 007034

18A. SIGNATURE OF REQUESTING OFFICIAL: Henry L. Berthold, C/WH/Pers — DATE SIGNED: 5 Sept 72

18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [signature] — DATE SIGNED: 15 Sep 1972

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY. CODE	21 OFFICE CODING NUMERIC	ALPHABETIC	22 STATION CODE	23 INTEGREE CODE	24 HOURS CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
16	10	51300	WH	45013		1	01 12 27		

28 NTE EXPIRES; 29 SPECIAL REFERENCE; 30 RETIREMENT DATA; 31 SEPARATION DATA CODE; 32 CORRECTION/CANCELLATION DATA; EOD DATA; 33 SECURITY REQ. NO.; 34 SEX

35 VET. PREFERENCE; 36 SERV. COMP. DATE; 37 LONG. COMP. DATE; 38 CAREER CATEGORY; 39 FEGLI HEALTH INSURANCE; 40 SOCIAL SECURITY NO.

41 PREVIOUS CIVILIAN GOVERNMENT SERVICE; 42 LEAVE CAT. CODE; 43 FEDERAL TAX DATA; 44 STATE TAX DATA

45 POSITION CONTROL CERTIFICATION; 46 O.P. APPROVAL; DATE APPROVED

FORM 1152 USE PREVIOUS EDITION

SECRET

25 SEP 1972

SECRET

1 8 DEC 1959

MEMORANDUM FOR: Charlotte Bustos-Videla
THROUGH : Chief, WH Division
SUBJECT : Quality Step Increase

1. I was pleased to learn that you have been granted a Quality Step Increase. Such recognition is proof of the high esteem in which you are held by your supervisors in the Clandestine Service.

2. Please accept my personal best wishes. I am confident that your future performance will be of a continuing high quality.

Thomas H. Karamessines
Deputy Director for Plans

SECRET

SECRET

12 DEC 1969

MEMORANDUM FOR: Head, Clandestine Service Career Service

SUBJECT : Notification of Approval of Quality Step Increase - Charlotte Bustos-Videla

1. I am pleased to send to you the attached official notification of the approval of a second Quality Step Increase to be awarded to this employee. The previous Quality Step Increase was effective March 1964.

2. May I again ask that you arrange an appropriate ceremony for the presentation of this Quality Step Increase which is in recognition of her continuing excellent performance.

for Robert S. Wattles
Director of Personnel

SECRET

SECRET

SUBJECT: Request for Quality Step Increase (HR 20-37)
Mrs. Charlotte Bustos-Videla

APPROVAL RECOMMENDED:

Chairman, DDP QSI Panel — 9 Dec 69
Date

APPROVED:

for John J. Caldwell
Director of Personnel — 12 Dec 1969

SECRET

14-00000

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED	17 OCTOBER 1968
1. SERIAL NUMBER	007667
2. NAME (Last-First-Middle)	BUSTOS-VIDELA, C[redacted] Z.
3. NATURE OF PERSONNEL ACTION	REASSIGNMENT
4. EFFECTIVE DATE REQUESTED (Month / Day / Year)	11 / 03 / 68
5. CATEGORY OF EMPLOYMENT	REGULAR
6. FUNDS	V TO V; V TO CF; CF TO V; X CF TO CF
7. FINANCIAL ANALYSIS NO. CHARGEABLE	9135 0990
8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS	DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION
10. LOCATION OF OFFICIAL STATION	MEXICO CITY, MEXICO
11. POSITION TITLE	OPS OFFICER (13)
12. POSITION NUMBER	0418
13. CAREER SERVICE DESIGNATION	D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	GS
15. OCCUPATIONAL SERIES	0136.01
16. GRADE AND STEP	13 4
17. SALARY OR RATE	$ 15849

18. REMARKS

STAFF EMPLOYEE SPECIAL

FROM: POSTION # 1528

1 - Finance

18A. SIGNATURE OF REQUESTING OFFICIAL: Henry L. Berthold, C/WH/Personnel — DATE SIGNED:

18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER — DATE SIGNED:

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE: 37 — 20. EMPLOY. CODE: 10 — 21. OFFICE CODING (NUMERIC / ALPHABETIC) — 22. STATION CODE — 23. INTEGREE CODE — 24. HOURS CODE: 3 — 25. DATE OF BIRTH — 26. DATE OF GRADE — 27. DATE OF LEI

28. VET EXPIRES — 29. SPECIAL REFERENCE — 30. RETIREMENT DATA (1-CS, 2-CSCH, 3-FICA, 4-NONE) — 31. SEPARATION DATA CODE — 32. CORRECTION CANCELLATION DATA — EOD DATA — 33. SECURITY REQ NO — 34. SEX

35. VET PREFERENCE — 36. SERV. COMP. DATE — 37. LONG COMP. DATE — 38. CAREER CATEGORY — 39. FEGLI HEALTH INSURANCE — 40. SOCIAL SECURITY NO.

41. PREVIOUS CIVILIAN GOVERNMENT SERVICE — 42. LEAVE CAT. — 43. FEDERAL TAX DATA — 44. STATE TAX DATA

45. POSITION CONTROL CERTIFICATION — 46. O.P. APPROVAL — DATE APPROVED

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 13 OCTOBER 1967

1. SERIAL NUMBER: 007667
2. NAME (Last-First-Middle): BUSTOS-VIDELA, CHARLOTTE Z. 02-17-67
3. NATURE OF PERSONNEL ACTION: REASSIGNMENT
4. EFFECTIVE DATE REQUESTED: MONTH 07 DAY 16 YEAR 67
5. CATEGORY OF EMPLOYMENT: REGULAR*
6. FUNDS: V TO V / V TO CF / CF TO V / X CF TO CF
7. FINANCIAL ANALYSIS NO. CHARGEABLE: 8135 0990
8. LEGAL AUTHORITY (Completed by Office of Personnel):
9. ORGANIZATIONAL DESIGNATIONS: DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION
10. LOCATION OF OFFICIAL STATION: MEXICO CITY, MEXICO
11. POSITION TITLE: OPS OFFICER
12. POSITION NUMBER: 1528
13. CAREER SERVICE DESIGNATION: D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.): GS
15. OCCUPATIONAL SERIES: 0136.01
16. GRADE AND STEP: XX 13 3
17. SALARY OR RATE: $ 13,769

18. REMARKS

OPS OFFICER OCCUPYING INTEL ANALYST.

X* STAFF EMPLOYEE XXXX SPECIAL.

No objection
Joyce Mayelin
CSPS/Agent Branch

XX CONCUR: [signature] CCS

1 - Finance

18A. SIGNATURE OF REQUESTING OFFICIAL: [signature] Henry L. Berthold C/WH/Personnel
DATE SIGNED: 17 Oct 67
18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [signature]
DATE SIGNED: 17 Oct 67

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING NUMERIC	ALPHABETIC	22 STATION CODE	23 INTEGREE CODE	24 HQTRS CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
32	10	5122	[illegible]	11535		3	01 12 29		

28 NTE EXPIRES; 29 SPECIAL REFERENCE: 22; 30 RETIREMENT DATA; 31 SEPARATION DATA CODE; 32 CORRECTION/CANCELLATION DATA; EOD DATA; 33 SECURITY RQ NO; 34 SEX

35 VET. PREFERENCE; 36 SERV. COMP. DATE; 37 LONG COMP. DATE; 38 CAREER CATEGORY; 39 FEDERAL HEALTH INSURANCE; 40 SOCIAL SECURITY NO

41 PREVIOUS CIVILIAN GOVERNMENT SERVICE; 42 LEAVE CAT CODE; 43 FEDERAL TAX DATA; 44 STATE TAX DATA

45 POSITION CONTROL CERTIFICATION: [signature]
46 O.P. APPROVAL: [signature]
DATE APPROVED: [illegible]

FORM 3-67 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 Excluded from automatic downgrading and declassification

SECRET

28 June 1967

MEMORANDUM FOR: Central Cover Group

SUBJECT : Cover for Charlotte E. Bustos-Videla

1. Mrs. Charlotte E. Bustos-Videla is being transferred PCS to Mexico City in staff capacity. She will fill slot 1523.

2. Mrs. Bustos-Videla is traveling under Travel Order No. 39-68. (See copy attached) Her cover will be that of a dependent wife entering Mexico on the Visitante visa of her husband, Dr. Cesar Bustos-Videla, who is receiving a Visitante visa in connection with a teaching contract he has with the Las Américas University, Mexico City. The University is paying for the travel of Dr. Bustos-Videla only and for all documentation. The University also will provide no quarters or quarters allowance. Under the travel order Mrs. Bustos-Videla will receive mileage and single perdiem for the trip to Mexico City. Limited household effects will be sent, the remaining items (also limited) will be stored at Government expense.

3. The cover story to be used by Mrs. Bustos-Videla is [illegible] Army, [illegible] Operations Group effective 15 July 1967. She will travel to Mexico with her husband, where she will meet friends and obtain local employment with the U.S. Embassy.

4. Actually, Mrs. Bustos-Videla will remain in pay status as a Staff Employee.

5. Due to the change in cover stories, it is requested that CCG/MC take appropriate steps to see that the salary received through 15 July 1967 be covered by an Army W-2, and that effective 15 July 1967, D.C. Income tax no longer be withheld, and all subsequent salary be covered by a notional Department of State W-2. Her salary government checks should continue to be deposited to the National Bank of Washington, Dupont Circle Branch, Account No. 3 [illegible] 36 6. She will receive no field allotment.

Robert D. Cashman
Chief, WH Personnel

SECRET

14-00000

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 10 JULY 1967

1. SERIAL NUMBER	2. NAME (Last-First-Middle)
007667	BUSTOS VIDELA, ~~CHARLOTTE~~ Z.

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE REQUESTED (MONTH / DAY / YEAR)	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS	07 / 16 / 67	REGULAR

6. FUNDS	V TO V	XXX V TO CF	CF TO V	CF TO CF	7. FINANCIAL ANALYSIS NO. CHARGEABLE	8. LEGAL AUTHORITY (Completed by Office of Personnel)
		XXX			8135 0990	

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION	MEXICO CITY, MEXICO

11. POSITION TITLE	12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
OPS OFFICER (11)	1528	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 3	$ 13,769

18. REMARKS

X OPS OFFICER occupying Intel Analyst Position

FROM: DDP/WH/1/Pos. No. 1201

PRA IN ACCORDANCE WITH HR20-17d(b),NOT TO EXCEED TWO YEARS.

G 51

G 34

R Finance

18A. SIGNATURE OF REQUESTING OFFICIAL	DATE SIGNED	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED
C/WH/Personnel Robert D. Cashman	10 July	Paul M. [signature]	13 July 67

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC	ALPHABETIC	22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
20	10	51626	WH	45075		3	01 12 29		

28. NTE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA (1-CSC, 3-FICA, 4-NONE) CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	EOD DATA	33. SECURITY REQ NO	34. SEX
07 15 69	82						

35. VET PREFERENCE CODE (0-NONE, 1-5 PT, 2-10 PT)	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY (CAR, PROV, TEMP) CODE	39. FEGLI/HEALTH INSURANCE CODE (0-WAIVED, 1-YES) HEALTH INS. CODE	40. SOCIAL SECURITY NO

41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE (0-NO PREVIOUS SERVICE, 1-NO BREAK IN SERVICE, 2-BREAK IN SERVICE (LESS THAN 3 YEARS), 3-BREAK IN SERVICE (MORE THAN 3 YEARS))	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED (1-YES, 2-NO) CODE NO. TAX EXEMPTIONS	44. STATE TAX DATA FORM EXECUTED (1-YES, 2-NO) CODE NO. TAX EXEMP STATE CODE

45. POSITION CONTROL CERTIFICATION	46. O.P. APPROVAL	DATE APPROVED
C7-1467W	[signature]	[illegible]

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 19 OCTOBER 1966

1. SERIAL NUMBER	2. NAME (Last-First-Middle)
007667	BUSTOSVIDELA, C.Z.

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE REQUESTED (MONTH / DAY / YEAR)	5. CATEGORY OF EMPLOYMENT
PROMOTION	10 / 23 / 66	REGULAR

6. FUNDS			7. FINANCIAL ANALYSIS NO. CHARGEABLE	8. LEGAL AUTHORITY (Completed by Office of Personnel)
XX V TO V		V TO CF	7235 0620	
CF TO V		CF TO CF		

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP/WH BRANCH 1 FI SECTION	WASHINGTON, D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
OPS OFFICER (13)	1201	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 3	$ 13,769

18. REMARKS

FROM: GS-12/6 ($12,822)

1 Finance

18A. SIGNATURE OF REQUESTING OFFICIAL	DATE SIGNED	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED
Edward L. O'Malley Robert D. Cashman C/WH/Pers	21 Oct 66	John P. Brown	10/21/66

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC	ALPHABETIC	22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
22	10	51300	WH	25013		1	01 12 29	10 23 66	10 23 66

28. NTE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA (1-CSC, 2-FICA, 3-NONE) CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	EOD DATA	33. SECURITY REQ NO	34. SEX

35. VET PREFERENCE CODE (0-NONE, 1-5 PT, 2-10 PT)	36. SERV COMP DATE MO. DA. YR.	37. LONG. COMP DATE MO. DA. YR.	38. CAREER CATEGORY CAR RESV PROV-TEMP CODE	39. FEGLI HEALTH INSURANCE CODE (0-WAIVED, 1-YES) HEALTH INS. CODE	40. SOCIAL SECURITY NO

41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE (0-NO PREVIOUS SERVICE, 1-NO BREAK IN SERVICE, 2-BREAK IN SERVICE (LESS THAN 3 YEARS), 3-BREAK IN SERVICE (MORE THAN 3 YEARS))	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED (1-YES, 2-NO) CODE NO TAX EXEMPTIONS	44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMP STATE CODE

45. POSITION CONTROL CERTIFICATION	46. O P APPROVAL	DATE APPROVED
10-21-66 N	[illegible signature]	10/21/66

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 Excluded from automatic downgrading and declassification

14-00000

1 SEP 1966

MEMORANDUM FOR: CSPS/B

SUBJECT : Recommendation for Promotion of Charlotte Bustos-Videla

1. The promotion recommendation to GS-13 of Mrs. Charlotte Bustos-Videla is hereby submitted. Mrs. Bustos-Videla entered the Agency in August 1951 as a GS-5 and rapidly and deservedly rose to a GS-12 by 1959. She has now been almost seven years in grade and has been recommended for promotion to the CSPS/B by WH Division five times previously.

2. This outstanding officer has continued to perform at the exceptional level which has by now become her standard of performance. Her past four annual Fitness Reports have each given her an overall rating of outstanding. In this connection it is noteworthy that no two Fitness Reports were written by the same rating officer. She continues to occupy a GS-12 officer slot and her performance clearly continues to exceed the requirements for that position. She is considered to be one of the outstanding women who have demonstrated their capacity for further advancement within the Agency.

3. Mrs. Bustos-Videla not only continues to bring continuity to the Mexican Branch through her long experience on Mexican affairs, but consistently contributes to the smooth functioning of the Branch through her highly efficient organizational capabilities. She has been called upon to handle all manner of difficult desk problems. She invariably responds quickly, cheerfully, and effectively. She has been instrumental in on-the-job training of a number of officers, both for desk assignments and in preparation for field assignments. She has excellent rapport with innumerable persons in other areas and staffs, thus adding to the efficiency and speed with which she accomplishes her daily tasks. Her promotion at this time is urged.

William V. Broe
Chief,
Western Hemisphere Division

Approved by CS Career Service Board
13 OCT 1966

SECRET
(When Filled In)

11 August 1966

MEMORANDUM FOR: Charlott Z. Bustos-Videla

THROUGH : Head of CI Career Service

SUBJECT : Notification of Non-eligibility for Designation as a Participant in the CIA Retirement and Disability System

1. As you may know, we are in the process of reviewing the employment history and current ~~career~~ field of all employees in the Agency to identify those who are eligible for designation as a participant in the new CIA Retirement and Disability System. In this process, the initial review of each case is made by the individual's Career Service. If the Head of his Career Service nominates him for participation in the System, this nomination is reviewed by the CIA Retirement Board which recommends final action to me. However, if the Head of the Career Service advises that the employee does not meet the basic requirements of HR 20-50 for participation, I have accepted this finding without further review by the CIA Retirement Board. This practice has been adopted in the interest of expediting this screening process so that those employees who are eligible to participate in the System may be designated participants as soon as possible.

2. In your case, the Head of your Career Service has advised me that you do not meet the requirements of HR 20-50 for designation as a participant and I have accordingly made the formal determination required by the regulation that you are not eligible for designation. From a review of your record it appears that the decision of your Career Service was based upon the fact that you do not have sufficient time prior to completing 15 years of service with the Agency in which you could complete a minimum of 60 months of qualifying service as required by regulation. My determination that you are not eligible at this time for designation in no way affects your current status under the Civil Service Retirement System, nor does it preclude reconsideration of your eligibility to participate in the CIA System if you should meet the requirements for designation in the future.

3. Should you desire further information concerning the requirements for designation as a participant in the CIA Retirement System, I suggest that you read paragraph e of HR 20-50 and paragraph 5 of the Employee Bulletin dated 30 July 1965, entitled "Public Law 88-643, The Central Intelligence Agency Retirement Act of 1964 for Certain Employees."

4. It is always possible that the records upon which the determination made in your case may have been incomplete or inaccurate regarding your actual employment history with the Agency. If, after studying the materials cited above, you have questions regarding the determination that you are not eligible to participate in the CIA Retirement System, please feel free to contact officials of your Career Service. They are familiar with the details of your case and will gladly discuss them with you. In addition, you may wish to discuss your case with the CIA Retirement Staff located in Room 205, Magazine Building (extension 2847). If such discussions do not resolve any questions you have regarding your eligibility, you may request that your case be formally considered by the CIA Retirement Board. However, this request must be made within 30 days of the date of this memorandum.

Emmett D. Echols
Director of Personnel

SECRET

14-00000

EYES ONLY
SECRET

1 MAR 1966

MEMORANDUM FOR: Secretary, CS/CS Panel (Section A)

SUBJECT : Recommendation for Promotion to Grade GS-13, Charlotte Z. Bustos-Videla

1. The promotion request from GS-12 to GS-13 on Mrs. Bustos-Videla is hereby submitted.

2. This outstanding officer has continued to perform at the exceptional level which has by now become for her a standard of performance. She now formally occupies a senior (GS-13) FI Officer slot in the Mexican Branch and her performance clearly continues to exceed the requirement for that position. She is still considered to be one of the outstanding women who have demonstrated their capacity for further advancement within the Agency, independently, of the experience on Mexican affairs acquired through continuity in her present assignment.

3. The comments made in connection with the four previous promotion recommendations continue to be entirely applicable.

4. Subject is 37 years old and has been in grade as a GS-12 for the past six years.

William V. Broe
Chief,
Western Hemisphere Division

EYES ONLY
SECRET

14-00000

FILES ONLY
SECRET

9 SEP 1965

MEMORANDUM FOR: Secretary, CS/CS Panel (Section A)

SUBJECT : Recommendation for Promotion to Grade GS-13, Charlotte Z. Bustos-Videla

1. The promotion request from GS-12 to GS-13 on Mrs. Bustos-Videla is hereby resubmitted.

2. This outstanding officer has continued to perform at the exceptional level which has by now become for her a standard of performance. She now formally occupies a senior (GS-13) FI Officer slot in the Mexican Branch and her performance clearly continues to exceed the requirement for that position. She is still considered to be one of the outstanding women who have demonstrated their capacity for further advancement within the Agency, independently of the expertise on Mexican affairs acquired through continuity in her present assignment.

3. The comments made in connection with the three previous promotion recommendations continue to be entirely applicable.

4. Subject is 36 years old and has been in grade as a GS-12 for the past six years.

by [signature]
William V. Broe
Chief,
Western Hemisphere Division

not approved

14-00000

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 28 JULY 1965

1 SERIAL NUMBER: 007667

2 NAME (Last-First-Middle): BUSTOS-VIDELA, C~~[illegible]~~ Z.

3 NATURE OF PERSONNEL ACTION: REASSIGNMENT

4 EFFECTIVE DATE REQUESTED: MONTH AUG | DAY 1 | YEAR 65

5 CATEGORY OF EMPLOYMENT: REGULAR

6 FUNDS: XX V TO V | V TO CF | CF TO V | CF TO CF

7 COST CENTER NO. CHARGEABLE: 6235 0620

8 LEGAL AUTHORITY (Completed by Office of Personnel):

9 ORGANIZATIONAL DESIGNATIONS:
DDP/WH
BRANCH 1
~~MEXICO SECTION~~ 3rd Section

10 LOCATION OF OFFICIAL STATION: WASHINGTON, D.C.

11 POSITION TITLE: OPS OFFICER (13)

12 POSITION NUMBER: 1201

13 CAREER SERVICE DESIGNATION: D

14 CLASSIFICATION SCHEDULE (GS, LB, etc.): GS

15 OCCUPATIONAL SERIES: 0136.01

16 GRADE AND STEP: 12 ~~4~~ 5

17 SALARY OR RATE: $ ~~11,915~~ 11670

18 REMARKS:

FROM: DDP/WH/MEXICO SECTION/1202/

MRS. BUSTOS-VIDELA WILL REPLACE MR. RICHARD SCUTT WHO WILL BE REASSIGNED TO DDP/EE.
TO BE EFFECTIVE 1 AUGUST 1965

Received By CSPD [illegible]

1-Security
1-Finance

18A SIGNATURE OF REQUESTING OFFICIAL: [signature]
ROBERT D. CASHMAN
C/WH/PERS

DATE SIGNED: 30 July

18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [signature]

DATE SIGNED: 8/4/65

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY. CODE	21 OFFICE CODING NUMERIC	ALPHABETIC	22 STATION CODE	23 INTEGRATE CODE	24 HOURS CODE	25 DATE OF BIRTH MO. DA. YR.	26 DATE OF GRADE MO. DA. YR.	27 DATE OF LEI MO. DA. YR.
30	10	5130	WH [illegible]			1	01 12 29		

28 NTE EXPIRES MO. DA. YR. | 29 SPECIAL REFERENCE | 30 RETIREMENT DATA (1-CSC, 2-FICA, 3-NONE) CODE | 31 SEPARATION DATA CODE | 32 CORRECTION/CANCELLATION DATA TYPE MO. DA. YR. | EOD DATA | 33 SECURITY REQ NO | 34 SEX

35 VET. PREFERENCE CODE | 36 SERV. COMP. DATE MO. DA. YR. | 37 LONG COMP. DATE MO. DA. YR. | 38 CAREER CATEGORY | 39 FEGLI, HEALTH INSURANCE CODE (0-WAIVED, 1-YES), HEALTH INS. CODE | 40 SOCIAL SECURITY NO.

41 PREVIOUS GOVERNMENT SERVICE DATA CODE (0-NO PREVIOUS SERVICE, 1-NO BREAK IN SERVICE, 2-BREAK IN SERVICE (LESS THAN 3 YEARS), 3-BREAK IN SERVICE (MORE THAN 3 YEARS)) | 42 LEAVE CAT. CODE | 43 FEDERAL TAX DATA: FORM EXECUTED (1-YES, 2-NO), CODE, NO. TAX EXEMPTIONS | 44 STATE TAX DATA: FORM EXECUTED (1-YES, 2-NO), CODE, NO. TAX EXEMP, STATE CODE

45 POSITION CONTROL CERTIFICATION: 8/10/65 [initials]

46 O.P. APPROVAL: [signature]

DATE APPROVED: 8/4/65

FORM 6-63 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 Excluded from automatic downgrading and declassification

4 SEP 1964

MEMORANDUM FOR: Secretary, CSCS (Panel A)

SUBJECT : Recommendation for Promotion to GS-13
Mrs. Charlotte Bustos-Videla.

1. The promotion to GS-13 of Mrs. Charlotte Bustos-Videla is recommended. Mrs. Bustos-Videla entered the Agency in August 1951 as a GS-5 and rapidly and deservedly rose to a GS-12 grade by 1959.

2. This recommendation is based on Mrs. Bustos-Videla's performance during the past three years as the senior assistant to the various chiefs of the Mexican desk/branch, who unanimously have found her to be extremely competent and reliable both in her routine assignments and special tasks occasionally levied on her, such as country studies, compilation of programs, requirement reviews, etc.

3. Mrs. Bustos-Videla has consistently responded with intelligence and clarity and has materially contributed to orderly imaginative administration of Headquarters support to a most active station. In the process, she has been instrumental in training on-the-job innumerable officers both for desk assignments and in preparation for field assignments.

4. For her outstanding performance she received a quality step increase in April 1964. This deserved recognition should now be followed up at this time by a promotion to the next grade in accordance with the consistently good performance at the GS-13 level over a prolonged period of time.

Desmond FitzGerald
Chief
Western Hemisphere Division

14-00000

CONFIDENTIAL

14 APR 1964

MEMORANDUM FOR: Head, Clandestine Services Career Service

SUBJECT : Notification of Approval of Quality Step Increase - Mrs. Charlotte Bustos-Videla

1. I am pleased to send to you the attached official notification of the approval of the Quality Step Increase which you recommended for this employee.

2. The salary increase accomplished by the award of a Quality Step Increase is important and tangible evidence of the esteem in which the employee so recognized is held. However, I believe the commendatory and incentive benefits of this award will be partially lost unless it is presented in an appropriate ceremony which will afford the individual recognition among co-workers and supervisory officials. Also, I believe such recognition serves to inspire other employees to aspire to earning such recognition.

3. May I ask, therefore, that you arrange to have this Quality Step Increase presented at an appropriate ceremony.

Emmett D. Echols
Director of Personnel

Presented in a ceremony 4/24/64

CONFIDENTIAL

SECRET

20 March 1964

MEMORANDUM FOR: DDP/OP

THROUGH : Chief, Clandestine Services Personnel Office

SUBJECT : Charlotte Z. Bustos-Videla -- Request for Quality Step Increase

1. It is recommended that a Quality Step Increase for Mrs. Charlotte Z. Bustos-Videla be endorsed by you for the reasons presented in the attached memorandum prepared by the Chief, Western Hemisphere Division.

2. A review of Mrs. Bustos-Videla's Official Personnel File [illegible] supports the statements of Chief, WH. Without exception, the performance of this officer during [illegible] Agency employment has been identified by various and all supervisors as "Superior" and "Outstanding." Likewise, nothing in other records maintained by the Office of Personnel contradicts or modifies the impressive record made by Mrs. Bustos-Videla.

3. Testimony to the high regard which officials of WH Division view this officer's work is furnished by noting that Mrs. Bustos-Videla is the first female officer to be proposed for a QSI by WH and one of a total of but three officers nominated by that Division for the award since the QSI provision of the Federal Salary Reform Act of 1962 became effective in CIA approximately fifteen months ago.

[illegible]
Chief
Clandestine Services
Personnel Office

SECRET
[illegible]

14-00000

SECRET

6 March 1964

MEMORANDUM FOR: Deputy Director of Plans

ATTENTION : DDP/OP

SUBJECT : Request for Quality Step Increase for Charlotte Bustos-Videla

1. On the basis of the information presented below, it is recommended that a quality step increase be approved for Charlotte Bustos-Videla.

2. As stated in the accompanying Fitness Report, Subject's performance of her duties has been uniformly outstanding. In addition to her responsibilities as the desk officer for Mexico FI and Operational Support Projects, she carries a heavy burden in the areas of administration, preparation of special reports and training of personnel. She frequently represents the Mexico Section in dealings with other elements of the Agency and acts for the Chief of Section in his absence. Subject's performance clearly exceeds the normal requirements of the assignment and of her present GS grade level.

3. Subject's present high quality of performance typifies her performance over a period of several years and it is fully expected that this level will be maintained.

4. Consideration was given to the granting of a Merit Award but the quality step increase seems more appropriate in this case. Subject has been passed over for promotion in the past and due to limitations as to

14-00000

SECRET

area of assignment, it is unlikely that a promotion to grade GS-13 can be obtained. The salary increase is therefore thought to be the most fitting reward for her outstanding service.

J. C. King
J. C. KING
C/WHD

CONCUR:

[signature] 23 March 64
DDP/OP Date

APPROVED:

[signature] 24 MAR 64
Director of Personnel Date

14-00000

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 18 November 1963

1. SERIAL NUMBER	2. NAME (Last-First-Middle)
007667	BUSTOSVIDELA, C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE REQUESTED (MONTH / DAY / YEAR)	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT	12 / / 63	REGULAR

6. FUNDS	X V TO V	CF TO V	V TO CF	CF TO CF	7. COST CENTER NO. CHARGEABLE	8. LEGAL AUTHORITY (Completed by Office of Personnel)
	X				4235 1000 1000	

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP WH BRANCH 3 MEXICO SECTION	WASHINGTON, D. C.

11. POSITION TITLE	12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
OPS OFFICER	0321	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 4	$10,420

18. REMARKS

FROM: DDP/WH/3/607/Mexico Sec/Hqs

Recorded by CSPD

19A. SIGNATURE OF REQUESTING OFFICIAL	DATE SIGNED	19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED
ROBERT D. CASHMAN C/WH/Pers	11/19/63		

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

37	12	51460	[illegible]	75013	1	01 12 29

FOD DATA

43. POSITION CONTROL CERTIFICATION

1.21.63 [illegible]

SECRET

SECRET

15 March 1963

MEMORANDUM FOR: Secretary, CS/CS Panel (Section A)

SUBJECT: Recommendation for Promotion to Grade GS-13
Mrs. Charlotte Bustos-Videla

1. Mrs. Charlotte Bustos-Videla entered on duty with WH Division in August of 1951. She has served on a variety of desks covering South American as well as Mexican and Central American affairs. In each of her assignments she has demonstrated exceptional competence and devotion to duty.

2. Since December 1957 Mrs. Bustos has been assigned to the Mexican Desk and at present is Acting Chief. She is the soul and motor of that desk, managing many of its operations and supervising its staff, many of whom she has trained. She is past mistress of administrative procedures and the ease with which she obtains clearances, maintains files and secures necessary approvals while handling the most complicated operational aspects of projects is phenomenal. Her work output is enormous and yet everything is done simply and modestly with a minimum of excess motion. She is an outstanding employee and should be deserving of recognition.

3. It is recommended that Mrs. Bustos be promoted to grade GS-13.

J. C. KING
Chief,
Western Hemisphere Division

Not Approved
June 63

SECRET

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED: 1 June 1961

1. SERIAL NUMBER	107667
2. NAME (Last-First-Middle)	BUSTOS-VIDELA, C. Z.
3. NATURE OF PERSONNEL ACTION	NAME CHANGE FROM-CHARLOTTE L. ZEHRUNG
4. EFFECTIVE DATE REQUESTED (MONTH DAY YEAR)	06 / 13 / 61
5. CATEGORY OF EMPLOYMENT	REGULAR
6. FUNDS	X V TO V; CF TO V; V TO CF; CF TO CF
7. COST CENTER NO. CHARGEABLE	1235 1000 1000
8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS	DDP WH BRANCH 3 MEXICO SECTION
10. LOCATION OF OFFICIAL STATION	WASH., D. C.
11. POSITION TITLE	OPS OFFICER D
12. POSITION NUMBER	BA-607
12A. PCR CONTROL NO.	
13. CAREER SERVICE DESIGNATION	DI
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	GS 12
15. OCCUPATIONAL SERIES	0136.01
16. GRADE AND STEP	12 ~~1~~ 2
17. SALARY OR RATE	$ ~~8955~~ 9215

18. REMARKS

By Marriage.

18A. SIGNATURE OF REQUESTING OFFICIAL: [signature] Bowen

18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: O C Dawson

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING (NUMERIC / ALPHABETIC)	22. STATION CODE	23. INTEGREE CODE	24. POSITION CODE	25. DATE OF BIRTH (MO. DA. YR.)	26. DATE OF GRADE	27. DATE OF LEI
					/	1 12 29		

28. NTE EXPIRES · 29. SPECIAL REFERENCE · 30. RETIREMENT DATA · 31. SEPARATION DATA CODE · 32. CORRECTION/CANCELLATION DATA · POD DATA · 33. SECURITY REQ. NO. · 34. SEX

35. VET. PREFERENCE · 36. SERV. COMP. DATE · 37. LONG COMP. DATE · 38. FEGLI · 39. FEDERAL HEALTH BENEFITS · SOCIAL SECURITY NO.

40. PREVIOUS GOVERNMENT SERVICE DATA · 41. LEAVE CAT. CODE · 42. FEDERAL TAX DATA · 43. STATE TAX DATA

44. POSITION CONTROL CERTIFICATION: W.A. 6-2-61

45. O.P. APPROVAL: O C Dawson

FORM 1152

SECRET

SECRET

2[illegible] May 1961

MEMORANDUM FOR: WH/Personnel

SUBJECT: Change of Name

It is requested that all records in the Agency, including the section which issues payroll checks, be changed to reflect my married name: Charlotte Z. Bustos-Videla. This change is effective immediately.

Charlotte Z Bustos-Videla

Charlotte Z. Bustos-Videla
WH/3/Mexico

SECRET

SECRET

REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth Mo.	Da.	Yr.	4. Vet Pref. (None-0, 5 Pt-1, 10 Pt-2) Code	5. Sex	6. CS-EOD Mo.	Da.	Yr.
07667	ZEHRUNG CHARLOTTE	01	12	29	0	F 2	08	27	51

7. SCD Mo.	Da.	Yr.	8. CSC Retmt. (Yes-1, No-2) Code	9. CSC Or Other Legal Authority	10. Apmt. Affidav. Mo.	Da.	Yr.	11. FEGLI (Yes-1, No-2) Code	12. LCD Mo.	Da.	Yr.	13. [illegible] (Yes-1, No-2) Code
04	02	51	1	50 USCA 403 J					08	27	51	2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
DDP WH BRANCH III MEXICO SECTION	4613	WASH., D. C.	75013

16. Dept. - Field (Dept. - USfld - Frgn -) Code	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series
2	~~XXXXXXXXX~~ OPS OFCR	~~[illegible]~~ BA-321	GS	0136.51

21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade Mo.	Da.	Yr.	25. PSI Due Mo.	Da.	Yr.	26. Appropriation Number
11 ~~3~~ 4	$ ~~XXXX 7510~~ 7750	DI	04	10	55	04	06	58	0235-1000-1000 ~~8-2500-20~~

ACTION

27. Nature Of Action	Code	28. Eff. Date Mo.	Da.	Yr.	29. Type Of Employee	Code	30. Separation Data
PROMOTION	30	12	13	59	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
	4213	per merge WH	

33. Dept. - Field (Dept. - USfld - Frgn -) Code	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series
2	OPS OFCR	607 ~~BA-321~~	GS	0136.01

38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade Mo.	Da.	Yr.	42. PSI Due Mo.	Da.	Yr.	43. Appropriation Number
12 1	$ 8330	DI	12	13	59	6	12	61	0235-1000-1000

SOURCE OF REQUEST

A. Requested By (Name And Title)
P. C. Bowers WH Personnel Officer

B. For Additional Information Call (Name & Telephone Ext.)
John Washiako 8242

C. Request Approved By (Signature And Title)

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	[signature]	11 Dec 59	D. Placement		
B. Pos. Control	RJH	12-11-59	E.		
C. Classification			F. Approved By		

Remarks

FORM NO. 1152
1 MAR 57

SECRET

(4)

14-00000

SECRET

16 July 1959

Eastern Division CI

MEMORANDUM FOR: Secretary, CS/CS Panel (Section B)

SUBJECT: Recommendation for Promotion - Miss Charlotte L. Zehrung

1. Miss Charlotte L. Zehrung entered on duty with CIA on 27 August 1951. She was assigned to the Mexican Section of WH Division, Branch III, in June 1957. During the past two years she has been the responsible Case Officer for several FI and CE Projects.

2. Miss Zehrung is a loyal and dedicated employee. She has displayed considerable initiative and has been able to carry out her duties with a minimum amount of support. She readily accepts responsibility and is a highly efficient worker who thinks clearly and logically. Her knowledge of Headquarters and Field procedures in addition to her ability to organize her work greatly facilitates the smooth functioning of the Mexican Desk. She has demonstrated a superior comprehension of the numerous and varied projects of the Mexico City Station which has contributed to the overall Headquarters support of the stations performance. Because of her sound understanding of operations and her outstanding capacity for work, Miss Zehrung has an excellent potential for assuming greater responsibilities.

3. In recognition of her outstanding performance it is recommended that Miss Zehrung be promoted to grade GS-12.

J. C. King

J. C. KING
Chief
Western Hemisphere Division

S-E-C-R-E-T

17 March 1958

MEMORANDUM FOR: Charlotte Zehrung

VIA : Chief, WH/3/Mexico

1. You have been selected by your division, and authorized by the Clandestine Services Records Committee, to act as Records Officer for your component. Your appointment is based on your professional qualifications to carry out an assignment requiring experience, judgment, and a knowledge of the Clandestine Services objectives for your component.

2. You are to act on behalf of your Division or Staff element in authorizing the destruction of material of no value to the Clandestine Services in accordance with criteria established for this purpose. You are empowered to authorize the destruction of documents and index cards recommended for destruction by other members of your branch, and to desensitize KAPOK and RYBAT material which is no longer sensitive or which has been restricted in error. Your signature will be recognized by RI as that of an officially appointed Records Officer.

3. A series of meetings will be held in Room 1402, I Building to brief you and your colleagues on the details of your duties as Records Officer. You have been scheduled to attend the meeting to be held on Wednesday, 2 April 1958, 1300 - 1645 hours; if it is not possible for you to attend on the date designated, please call Extension 8325 to arrange for an alternate date. Please review the attached materials prior to this meeting.

HUGH T. CUNNINGHAM
DDP Records Policy Officer

Attachment
As stated

cc: Personnel Jacket of Addressee

S-E-C-R-E-T

14-00000

SECRET

Classify According To Content.

REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth (Mo Da Yr)	4. Vet. Pref. (None-0, 5 Pt.-1, 10 Pt.-2) Code	5. Sex	6. CS - EOD (Mo Da Yr)
	ZEHHUNG, Charlotte L.	1 12 29	0	F	

7. SCD (Mo Da Yr)	8. CSC Retmt. (Yes - 1, No - 2) Code	9. CSC Or Other Legal Authority	10. Apmt. Affidav. (Mo Da Yr)	11. FEGLI (Yes - 1, No - 2) Code	12. LCD (Mo Da Yr)	13. Mil Serv Credit LCD (Yes - 1, No - 2) Code
	1					

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
DDP/WH Branch III Mexico Section		Washington, D.C.	

16. Dept.- Field (Dept. - Usfld.- Frgn.-) X Code	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series
	Reports Officer	BA-0072.01	GS	0132.44

21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade (Mo Da Yr)	25. PSI Due (Mo Da Yr)	26. Appropriation Number
11-2 3	$ 6605 6720	DI	04 10 55	04 06 57	8-3500-20

ACTION

27. Nature Of Action	Code	28. Eff. Date (Mo Da Yr)	29. Type Of Employee	Code	30. Separation Data
REASSIGNMENT	56	4 13 58	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
DDP/WH Branch III Mexico Section	4613	Washington, D.C.	15013

33. Dept.- Field (Dept. - Usfld.- Frgn.-) X Code	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series
	I.O. (FI)	BA-521-22	GS	0136.51

38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade (Mo Da Yr)	42. PSI Due (Mo Da Yr)	43. Appropriation Number
11-2 3	$ 6605 6720	DI	4 10 55	04 06 57	8-3500-20

SOURCE OF REQUEST

A. Requested By (Name And Title)	C. Request Approved By (Signature And Title)
P.C. BOWERS WH/Personnel Officer	
B. For Additional Information Call (Name & Telephone Ext.) JOHN WASHINKO X 8242	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	[signature]		D. Placement	[signature]	4/1/58
B. Pos. Control	[signature]		E.		
C. Classification			F. Approved By	[illegible]	1 APR 1958

Remarks

PERIODIC STEP INCREASE 6-9-57

SECRET

FORM 5-57 1152a

14-00000

SECRET

Classify According To Content.

REQUEST FOR PERSONNEL ACTION

8 Nov 1957

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth Mo / Da / Yr	4. Vet. Pref. (None-0, 5 Pt.-1, 10 Pt.-2) Code	5. Sex	6. CS - EOD Mo / Da / Yr
	ZEHRUNG, Charlotte E.	1 / 12 / 29	0	F	

7. SCD Mo / Da / Yr	8. CSC Retmt (Yes-1, No-2) Code	9. CSC Or Other Legal Authority	10. Apmt. Affidav. Mo / Da / Yr	11. FEGLI (Yes-1, No-2) Code	12. LCD Mo / Da / Yr	13. Mil Serv Credit LCD (Yes-1, No-2) Code
	1					

PREVIOUS ASSIGNMENT

VOUCHERED

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
DDP/WH Branch II Argentina Section		Washington, D. C.	

16. Dept.-Field (Dept.-X, Usfld-, Fran-) Code	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series
X	Reports Officer	BA-313	GS	0132.44

21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade Mo / Da / Yr	25. PSI Due Mo / Da / Yr	26. Appropriation Number
GS-11-2	$ 6605.00	DI			8-3500-20

ACTION

27. Nature Of Action	Code	28. Eff. Date Mo / Da / Yr	29. Type Of Employee	Code	30. Separation Data
Reassignment	56	12 / 01 / 57	Regular	01	

PRESENT ASSIGNMENT

VOUCHERED

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
DDP/WH Branch III Mexico Section	4613	Washington, D.C.	11 W 2613

33. Dept.-Field (Dept.-X, Usfld-, Fran-) Code	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series
X / 2	Reports Officer	BA-72.01	GS	0132.44

38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade Mo / Da / Yr	42. PSI Due Mo / Da / Yr	43. Appropriation Number
GS-11-2	$ 6605.00	DI	04 / 10 / 55	04 / 06 / 58	8-3500-20

SOURCE OF REQUEST

A. Requested By (Name And Title) P.C. BOWERS WH/Personnel Officer

B. For Additional Information Call (Name & Telephone Ext.) H.C. MONTAGUE X 8242

C. Request Approved By (Signature And Title)

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	[signature]	11/21/57	D. Placement	[signature]	11/21/57
B. Pos. Control	KAL		E.		
C. Classification			F. Approved By	Robert W. Sheay	

Remarks

SECRET

Form 1152a 5-57

SECERT

REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

SECRET

H a n d l e W i t h C a r e

Charlotte BUSTONS-VIDELA

LEFT HAND SIDE

(numbered top to bottom)

1. Admin and finance documents - March 1974 - Jan 1978
2. Admin and finance documents - May 1951 - April 1956
3. Bio profile (sanitized form in file)

Charlotte BUSTOS-VIDELA

RIGHT HAND SIDE FILE

(numbered top to bottom)

1. Personnel/cover - after 1973
2. "Actions" - Personnel actions - after 1973
3. "Actions" - Personnel Actions - Before 1957
4. "Fitness Reports" - May 1973 - Nov 1977
5. "Fitness Reports" prior to 1957
6. "Other" - admin material - after 1973
7. "Other"-admin material-prior to 1957
8. "Medical" - all medical material related to clearances
9. "PHS-SEC" - document related to cover legend

14-00000

SECRET

CLASSIFIED BY [illegible]

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP

DATE: 11 Sep 72

FILE NO.: 3190

TO: (Check)		
X	CHIEF, CONTROL DIVISION	SS NUMBER: 069-24-3138
	CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER: 007667
X	CHIEF, OPERATING COMPONENT (For action) WH	ID CARD NUMBER: 2040

ATTN: Edmond A. Sullivan

REF: Form 1322 dated 5 May 72

OFFICIAL COVER: X ESTABLISHED / DISCONTINUED

SUBJECT: BUSTOS-VIDELA, Charlotte Z

UNIT: Joint Operations Group

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

	ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS
X	
XX	BASIC COVER PROVIDED EFFECTIVE DATE Aug 62
	OPERATIONAL COVER PROVIDED FOR ____ TDY ____ OTHER (Specify)
X	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HHB 20-7)
X	SUBMIT FORM 3254 ARMY W-2 TO BE ISSUED. (HHB 20-11)
X	SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-24)
X	SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-24)
X	EAA. CATEGORY I ___ CATEGORY II XX
X	SUBMIT FORM 2684 FOR AGE HOSPITALIZATION CARD

	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS EFFECTIVE DATE:
	SUBMIT FORM 3254 ____ W-2 TO BE ISSUED. (HHB 20-11)
	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HHB 20-7)
	EAA: CATEGORY I ___ CATEGORY II ___
	RETURN ALL OFFICIAL DOCUMENTATION TO CCS
	SUBMIT FORM 2684 FOR ____ HOSPITALIZATION CARD

DO NOT WRITE IN THIS BLOCK

REMARKS AND/OR COVER HISTORY

Aug 51 - Aug 62 Hqs/OVERT
Aug 62 - Jul 67 Hqs/DAC
Jul 67 - Aug 72 Mexico/State
Sep 72 - Present Hqs/DAC

CD/kas

DISTRIBUTION: COPY 1 - CD
COPY 2 - OPERATING COMPONENT
COPY 3 - OPCA
COPY 4 - OL/TELSEC
COPY 5 - OF
COPY 6 - CCS - FILE

CHIEF, [illegible] COVER [illegible]

FORM 1551 USE PREVIOUS EDITION

SECRET

E2 IMPDET

WARNING - [illegible]

SECRET

NOTIFICATION OF ESTABLISHMENT OF MILITARY COVER BACKSTOP	DATE: 7 August 1962
TO: (Check) [X] CHIEF, RECORDS AND SERVICES DIVISION; [ ] CHIEF, OPERATING COMPONENT, WH	ESTABLISHED FOR: (NEE: ZEHRUNG) BUSTOSVIDELA, Charlotte Z.
ATTN: WH/SS Mr. Mullano	FILE NO.: 3190
REF: Verbal Request for Cover, Form 1322 Dated 31 Jul 62	ID CARD NO.
MILITARY COVER BACKSTOP ESTABLISHED: U.S.Army Element, Joint Operations Group (8739)	

[X] BLOCK RECORDS:
(OPMEMO 20-800-11)

a. TEMPORARILY FOR ____ DAYS, EFFECTIVE ____________.

X b. CONTINUING, EFFECTIVE 7 August 1962.

[ ] SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3.
(HB 20-800-3)

[ ] ASCERTAIN THAT ARMY W-2 BEING ISSUED.
(HB 20-661-1)

[ ] SUBMIT FORM 1[illegible] ANY CHANGE AFFECTING THIS COVER.
(R 240 250)

[ ] SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY.
(R 240-250)

[ ] REMARKS:

[ ] COPY TO CPO/OP

43688

CP/SL [signature]
CHIEF, MILITARY COVER, CCG

DISTRIBUTION: 1 OSD ... PSD OS, 1 ADPD COMPT

FORM 1551 OBSOLETE PREVIOUS EDITIONS

SECRET

(19-20-44)

14-00000

THIS EMPLOYEE HAS BEEN IDENTIFIED AS
A C.I.A. EMPLOYEE FOR PURPOSES OF
WITHOLDING STATE AND FEDERAL TAXES

DATE DESIGNATED JANUARY 03 1961

07667 CHARLOTTE L ZEHRUNG 235100010

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OJCS 07/21/73

1 SERIAL NUMBER	2 NAME (LAST-FIRST-MIDDLE)
0C7657	BUSTOSVIDELA C Z

3 NATURE OF PERSONNEL ACTION	4 EFFECTIVE DATE (MO. DA. YR.)	5 CATEGORY OF EMPLOYMENT
REASSIGNMENT	07 01 73	

6 FUNDS	X	V TO V		V TO CF	7 FAN AND NSCA	8 CSC OR OTHER LEGAL AUTHORITY
		CF TO V		CF TO CF	4235 4525 0000	

9 ORGANIZATIONAL DESIGNATIONS	10 LOCATION OF OFFICIAL STATION
DDO/WH DIVISION	WASH., D.C.

11 POSITION TITLE	12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION
OPS OFFICER	1294	D

14 CLASSIFICATION SCHEDULE (GS, LB, etc.)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
GS	0136.01	13	

18 REMARKS

SIGNATURE OR OTHER AUTHENTICATION

SECRET

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 530* AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

EFFECTIVE DATE OF PAY ADJUSTMENT CORRECTED FROM 7 JAN 1973 TO 1 OCT 19.. UNDER EXECUTIVE ORDER 11777, DATED 12 APR 197.

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667	51 300	V	GS 13 7	$23,642

MDP: 26 SEPT 72

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER: 007667
2. NAME (LAST-FIRST-MIDDLE): BUSTOSVIDELA C Z
3. NATURE OF PERSONNEL ACTION: REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS
4. EFFECTIVE DATE: MO 09 DA 17 YR 72
5. CATEGORY OF EMPLOYMENT: REGULAR
6. FUNDS: V TO V; V TO CF; X CF TO V; CF TO CF
7. Financial Analysis No. Chargeable: 3235 0620 0000
8. CSC OR OTHER LEGAL AUTHORITY: 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS: DDP/WH DIVISION BRANCH 1 CA SECTION
10. LOCATION OF OFFICIAL STATION: WASH., D.C.
11. POSITION TITLE: OPS OFFICER
12. POSITION NUMBER: 1258
13. SERVICE DESIGNATION: D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.): GS
15. OCCUPATIONAL SERIES: 0136.01
16. GRADE AND STEP: 13 7
17. SALARY OR RATE: [illegible]
18. REMARKS:

W2 INFO: DEPT OF ARMY

HOME BASE: WH

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

16 | 10 | 51300 | WH | 73013 | 01 12 25

[illegible]

SECRET

MLH

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 7	$22,487

1 SERIAL NO.	2 NAME	3 ORGANIZATION	4 FUNDS	5 LWOP HOURS
007667	BUSTOSVIDELA C Z	51 620	CF	

6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS 13	6	$20,721	10/19/69	GS 13	7	$21,313	10/17/71		

CERTIFICATION AND AUTHENTICATION

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE | DATE

[x] NO EXCESS LWOP

[x] IN PAY STATUS AT END OF WAITING PERIOD

[ ] LWOP STATUS AT END OF WAITING PERIOD

16/35
559

CLERK'S INITIALS | AUDITED BY

FORM 560 E — PAY CHANGE NOTIFICATION

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 6	$20,721

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 6	$19,555

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667	51 100	V	GS 13 7	$24,811

1. Serial No.	2. Name	3.	4.
007667	BUSTOSVIDELA C Z	51 620 CF	

5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ
GS 13	5	$17,920	10/19/69	GS 13	6	$18,447	12/14/69			

8. Remarks and Authentication

QUALITY STEP INCREASE

/s/ R S WATTLES 12 DECEMBER 1969

PAY CHANGE NOTIFICATION

Form 560 Obsolete Previous Edition

14-00000

G51

1 SERIAL NO.	2. NAME	3 ORGANIZATION	4 FUNDS	5 LWOP HOURS
007667	BUSTOSVIDELA C Z	51 620	CF	

6. OLD SALARY RATE				7. NEW SALARY RATE				8 TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 13	4	$17,393	10/22/67	GS 13	5	$17,920	10/19/69		

CERTIFICATION AND AUTHENTICATION

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE [signature] DATE 8/6/69

16/35

- [ ] NO EXCESS LWOP
- [ ] IN PAY STATUS AT END OF WAITING PERIOD
- [ ] LWOP STATUS AT END OF WAITING PERIOD

CLERKS INITIALS AUDITED BY

FORM 7-66 560 E Use previous editions PAY CHANGE NOTIFICATION (4-51)

OCT 13 ... COMPENSATION

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 4	$17,393

14-00000

FVD: 31 OCT 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OLF

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)
007667	BUSTOSVIDELA C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO DA YR)	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT	11 03 68	REGULAR

6. FUNDS	V TO V		V TO CF	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY
	CF TO V	X	CF TO CF	9135 0990 0000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION	MEXICO CITY, MEXICO

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER	0418	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 4	15843

18. REMARKS
STAFF EMPLOYEE SPECIAL

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 Employ Code	21 OFFICE CODING (NUMERIC / ALPHABETIC)	22 STATION CODE	23 INTEGREE CODE	24 Hdqtrs Code	25 DATE OF BIRTH (MO DA YR)	26 DATE OF GRADE	27 DATE OF LEI
37	10	51620 WH	45075		3	01 12 29		

28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 Correction/Cancellation Data	EOD DATA	33 SECURITY REQ NO	34 SEX
		1 CSC 2 CIA 3 FICA 5 NONE					

35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 FEGLI / HEALTH INSURANCE	40 SOCIAL SECURITY NO
0 NONE 1 5 PT 2 10 PT			CAR / RESV / PROV / TEMP	1 WAIVER 2 YES / HEALTH INS CODE	

41 PREVIOUS CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT CODE	43 FEDERAL TAX DATA	44 STATE TAX DATA
0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)		FORM EXECUTED 1 YES 2 NO / CODE / NO TAX EXEMPTIONS	FORM EXECUTED 1 YES 2 NO / CODE / NO TAX EXEMP / STATE CODE

SIGNATURE OR OTHER AUTHENTICATION

POSTED
11-1-68

FORM 1150 Use Previous Edition

SECRET

FVD

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 4	$14,857	$15,849

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)
007667	BUSTOSVIDELA C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO DA YR)	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT	07 17 67	REGULAR

6. FUNDS	V TO V	CF TO V	V TO CF	CF TO CF	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY
				X	6135 0330 0000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION	MEXICO CITY, MEXICO

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
[illegible]	[illegible]	

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 3	1370[illegible]

18. REMARKS
STAFF EMPLOYEE [illegible]

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 Employ Code	21 OFFICE CODING (NUMERIC / ALPHABETIC)	22 STATION CODE	23 INTEGREE CODE	24 Nation Code	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
27	[illegible]	51 620 / [illegible]	40075		3	[illegible] 12		

28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA	COD DATA	33 SECURITY REQ NO	34 SEX
	02						

35 VET PREFERENCE	36 SERV. COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 FEGLI / HEALTH INSURANCE	40 SOCIAL SECURITY NO

41 PREVIOUS CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT CODE	43 FEDERAL TAX DATA	44 STATE TAX DATA

SIGNATURE OR OTHER AUTHENTICATION

POSTED [illegible]

14-00000

G51

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS
007667	BUSTOSVIDELA C Z	51 620	CF	

6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	SI	ADJ
GS 13	3	$13,769	10/23/66	GS 13	4	$14,217	10/22/67		

9. CERTIFICATION AND AUTHENTICATION

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE [signature] DATE 8/18/67

- [x] NO EXCESS LWOP
- [ ] IN PAY STATUS AT END OF WAITING PERIOD
- [ ] LWOP STATUS AT END OF WAITING PERIOD

CLERKS INITIALS E.D. ECHOLS AUDITED BY

FORM 7-66 560 E Use previous editions PAY CHANGE NOTIFICATION (4-31)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 3	$13,769	$14,407

SECRET
(When Filled In)

MAH: 18 JULY 67

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)
007667	BUSTOSVIDELA C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO DA YR)	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS	07 16 67	REGULAR

6. FUNDS	V TO V	V TO CF	CF TO V	CF TO CF	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY
		X			8135 0390 0000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION	MEXICO CITY, MEXICO

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER	1528	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 3	13769

18. REMARKS
OPS OFFICER OCCUPYING INTEL ANALYST POSITION.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. Employ Code	21. OFFICE CODING Numeric	Alphabetic	22. STATION CODE	23. INTEGREE CODE	24. Major Code	25. DATE OF BIRTH (MO DA YR)	26. DATE OF GRADE	27. DATE OF LEI
20	10	51620	WH	45075		3	01 12 29		

28. NTE EXPIRES (MO DA YR)	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	34. SEX
07 15 69	82				EOD DATA		

35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO.
CODE: 0 - NONE; 1 - 5 PT.; 2 - 10 PT.				0 - WAIVER; 1 - YES	

41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA
CODE: 0 - NO PREVIOUS SERVICE; 1 - NO BREAK IN SERVICE; 2 - BREAK IN SERVICE (LESS THAN 3 YRS); 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		FORM EXECUTED: 1 - YES, 2 - NO	FORM EXECUTED: 1 - YES, 2 - NO

SIGNATURE OR OTHER AUTHENTICATION

F. O. ECHOLS

POSTED
07-26-67 N

FORM 1150 Use Previous Edition

SECRET
(When Filled In)

14-00000

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)
007637	L.ST'SV IOOLA C 7

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO DA YR)	5. CATEGORY OF EMPLOYMENT
PROMOTION	1 23 63	REGULAR

6. FUNDS	V TO V		V TO CF	7. COST CENTER NO. CHARGEABLE	8. CSC OR OTHER LEGAL AUTHORITY
	CF TO V		CF TO CF	7231 0320 0000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP, WH BRANCH 1 FI SECTION	WASH., D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER	1001	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 3	13760

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. Employee Code	21. OFFICE CODING (NUMERIC / ALPHABETIC)	22. STATION CODE	23. INTEGREE CODE	24. Major Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
20	10	[illegible]	71010			[illegible]	10 28 60	[illegible] 60

28. NTE EXPIRES | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA | 31. SEPARATION DATA CODE | 32. CORRECTION CANCELLATION DATA | EOD DATA | 33. SECURITY REQ NO | 34. SEC

35. VET. PREFERENCE | 36. SERV. COMP DATE | 37. LONG COMP. DATE | 38. CAREER CATEGORY | 39. FEGLI / HEALTH INSURANCE | 40. SOCIAL SECURITY NO

41. PREVIOUS GOVERNMENT SERVICE DATA | 42. LEAVE CAT CODE | 43. FEDERAL TAX DATA | 44. STATE TAX DATA

SIGNATURE OR OTHER AUTHENTICATION

[signature]

FORM 11-62 1150 Use Previous Edition

SECRET

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
BUSTOS-VIDELA C Z	007667	51 300	V	GS 12 6	$12,025	$12,459

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
BUSTOS-VIDELA C Z	007667	51 300	V	GS 12 6	$12,459	$12,822

14-00000

Grade	Step	Salary	Last Ell. Date	Grade	Step	Salary	Effective Date
GS 12	5	$11,670	10/13/63	GS 12	6	$12,075	10/10/65

007667 BUSTOSVIDELA C Z

OLD SALARY RATE / NEW SALARY RATE

8 Remarks and Authorization

/ / NO EXCESS LWOP
/ / IN PAY STATUS AT END OF WAITING PERIOD
/ / LWOP STATUS AT END OF WAITING PERIOD
CLERKS INITIALS D.Y. AUDITED BY

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE: [signature] DATE 23 Aug 65

PAY CHANGE NOTIFICATION

Form 9-61 560 Obsolete Previous Edition (4-51)

OCT 14 11 22 AM '65

NJM: 11 AUG 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)
007667	BUSTOSVIDELA C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO. DA. YR)	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT	08 01 65	REGULAR

6. FUNDS	V TO V / CF TO V	V TO CF / CF TO CF	7. COST CENTER NO. CHARGEABLE	8. CSC OR OTHER LEGAL AUTHORITY
-X-			6235 0620 0000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP/WH BRANCH 1 FI SECTION	WASH., D. C.

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER	1201	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 5	11670

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. Employ Code	21. OFFICE CODING NUMERIC	ALPHABETIC	22. STATION CODE	23. INTEGREE CODE	24. Hdqtrs. Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
37	10	51300	WH	75013		1	01 12 29		

28. NTE EXPIRES | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA (1 CSC, 2 FICA, 3 NONE) | 31. SEPARATION DATA CODE | 32. CORRECTION/CANCELLATION DATA | EOD DATA | 33. SECURITY REQ NO | 34. SEX

35. VET PREFERENCE (0 NONE, 1 5 PT, 2 10 PT) | 36. SERV. COMP DATE | 37. LONG COMP DATE | 38. CAREER CATEGORY | 39. FEGLI / HEALTH INSURANCE (0 WAIVED, 1 YES; HEALTH INS CODE) | 40. SOCIAL SECURITY NO

41. PREVIOUS GOVERNMENT SERVICE DATA (0 NO PREVIOUS SERVICE; 1 NO BREAK IN SERVICE; 2 BREAK IN SERVICE LESS THAN 3 YRS; 3 BREAK IN SERVICE MORE THAN 3 YRS) | 42. LEAVE CAT CODE | 43. FEDERAL TAX DATA (FORM EXECUTED 1 YES 2 NO; NO. TAX EXEMPTIONS) | 44. STATE TAX DATA (FORM EXECUTED 1 YES 2 NO; CODE; NO. TAX EXEMP; STATE CODE)

SIGNATURE OR OTHER AUTHENTICATION

[initials] 8/12/65

Form 1150 Use Previous Edition

SECRET

(When Filled In)

14-00000

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCS 05/27/65

1 SERIAL NUMBER	2 NAME (LAST-FIRST-MIDDLE)
007667	BUSTOSVIDELA C Z

3 NATURE OF PERSONNEL ACTION	4 EFFECTIVE DATE (MO. DA. YR.)	5 CATEGORY OF EMPLOYMENT
REASSIGNMENT	05 31 65	

6 FUNDS			7 COST CENTER NO. CHARGEABLE	8 CSC OR OTHER LEGAL AUTHORITY
X	V TO V	V TO CF	5235 0620 0000	
	CF TO V	CF TO CF		

9 ORGANIZATIONAL DESIGNATIONS	10 LOCATION OF OFFICIAL STATION
DDP/WH DIVISION	WASH., D. C.

11 POSITION TITLE	12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION
OPS OFFICER	1202	D

14 CLASSIFICATION SCHEDULE (GS, LB, etc.)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
GS	0136.01	12	

18 REMARKS

POSTED
6-9-65 HT

SIGNATURE OR OTHER AUTHENTICATION

Form 1150b Use Previous
1-63 MFG 1-63 Edition

SECRET

GROUP 1
Excluded from automatic downgrading and declassification

(When Filled In)

ADJUSTMENT OF SALARY RATE IN ACCORDANCE WITH THE SCHEDULES OF THE GOVERNMENT EMPLOYEES SALARY REFORM ACT OF 1964 PURSUANT TO THE AUTHORITY OF THE DIRECTOR OF CENTRAL INTELLIGENCE AS PROVIDED IN THE CENTRAL INTELLIGENCE AGENCY ACT OF 1949, AS AMENDED, AND POLICY DIRECTIVE ISSUED BY THE ACTING DIRECTOR OF CENTRAL INTELLIGENCE DATED 8 OCTOBER 1962.

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

GENERAL SCHEDULE RATES

Federal Employees Salary Act of 1964

GRADE	*Per Annum Rates and Steps*									
	1	2	3	4	5	6	7	8	9	10
GS- 1	$3,385	$3,500	$3,615	$3,730	$3,845	$3,960	$4,075	$4,190	$4,305	$4,420
GS- 2	3,680	3,805	3,930	4,055	4,180	4,305	4,430	4,555	4,680	4,805
GS- 3	4,005	4,140	4,275	4,410	4,545	4,680	4,815	4,950	5,025	5,220
GS- 4	4,480	4,630	4,780	4,930	5,080	5,230	5,380	5,530	5,680	5,830
GS- 5	5,000	5,165	5,330	5,495	5,660	5,825	5,990	6,155	6,320	6,485
GS- 6	5,505	5,690	5,875	6,060	6,245	6,430	6,615	6,800	6,925	7,170
GS- 7	6,050	6,250	6,450	6,650	6,850	7,050	7,250	7,450	7,650	7,850
GS- 8	6,630	6,850	7,070	7,290	7,510	7,730	7,950	8,170	8,390	8,610
GS- 9	7,220	7,465	7,710	7,955	8,200	8,445	8,690	8,935	9,180	9,425
GS-10	7,900	8,170	8,440	8,710	8,980	9,250	9,520	9,790	10,060	10,330
GS-11	8,650	8,945	9,240	9,535	9,830	10,125	10,420	10,715	11,010	11,305
GS-12	10,250	10,605	10,960	11,315	11,670	12,025	12,380	12,735	13,090	13,445
GS-13	12,075	12,495	12,915	13,335	13,755	14,175	14,595	15,015	15,435	15,855
GS-14	14,170	14,660	15,150	15,640	16,130	16,620	17,110	17,600	18,090	18,580
GS-15	16,460	17,030	17,600	18,170	18,740	19,310	19,880	20,450	21,020	21,590
GS-16	18,935	19,590	20,245	20,900	21,555	22,210	22,865	23,520	24,175	.....
GS-17	21,445	22,195	22,945	23,695	24,445	.....	.....	.....	.....	.....
GS-18	24,500	....	.....	.....	.....	.....	.....	.....	.....	.....

007667	BUSTOS-VIDELA, C. Z.	52 400	V

OLD SALARY RATE				NEW SALARY RATE				TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LEI	ADA
GS 12	4	$10,970	10/13/63	GS 12	5	$11,300	03/29/64			

Remarks and Authentication

QUALITY STEP INCREASE.

SIGNED: E. D. ECHOLS DATE: MARCH 24, 1964

PAY CHANGE NOTIFICATION

Form 9-61 560 Obsolete Previous Edition

SECRET
(When Filled In)

MHC:5 DEC 63

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST MIDDLE)
007667	BUSTOSVIDELA C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO. DA. YR)	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT	12 05 63	REGULAR

6. FUNDS	X V TO V	CF TO V	V TO CF	CF TO CF	7. COST CENTER NO. CHARGEABLE	8. CSC OR OTHER LEGAL AUTHORITY
	X				4235 1000 1000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP WH BRANCH 3 MEXICO SECTION	WASH., D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER	0321	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 4	10420

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING (NUMERIC / ALPHABETIC)		22. STATION CODE	23. INTEGREE CODE	24. Hdqtrs Code	25. DATE OF BIRTH (MO DA YR)	26. DATE OF GRADE	27. DATE OF LEI
37	10	51400	WH	75013		1	01 12 29		

28. NTE EXPIRES 29. SPECIAL REFERENCE 30. RETIREMENT DATA 31. SEPARATION DATA CODE 32. CORRECTION/CANCELLATION DATA EOD DATA 33. SECURITY REQ NO 34. SEX

35. VET PREFERENCE 36. SERV COMP DATE 37. LONG COMP DATE 38. CAREER CATEGORY 39. FEGLI / HEALTH INSURANCE 40. SOCIAL SECURITY NO.

41. PREVIOUS GOVERNMENT SERVICE DATA 42. LEAVE CAT CODE 43. FEDERAL TAX DATA 44. STATE TAX DATA

SIGNATURE OR OTHER AUTHENTICATION

POSTED

14-00000

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND OCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN FUNDS	GR-ST	OLD SALARY	NEW SALARY
BUSTOSVIDELA C Z	007667	51 400 V	GS 12 4	$10,420	$10,970

PAY CHANGE NOTIFICATION

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
007667	BUSTOSVIDELA C Z	64 400 V 2B	

5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last PR. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 12	3	$10,195	10/14/62	GS 12	4	$10,420	10/13/63			

8. Remarks and Authentication

/ / NO EXCESS LWOP
/ / IN PAY STATUS AT END OF WAITING PERIOD
/ / LWOP STATUS AT END OF WAITING PERIOD
CLERKS INITIALS AUDITED BY

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE: ED ECHOLS DATE

Form 560 Obsolete Previous Edition (4-51)

14-00000

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
DCI MEMORANDUM DATED 1 AUGUST 1954 , SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 14 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	OLD GR-ST	OLD SALARY	NEW GR-ST	NEW SALARY
BUSTOSVIDELA C Z	007667	64400	V	12 2	$ 9215	12 2	$ 9790

3235-000-1000

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
007667	BUSTOSVIDELA C Z	64 400 V	

5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EH Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ
GS-12	2	$ 9,790	06/11/61	GS-12	3	$10,105	10/14/62			

8. Remarks and Authentication

/ /. NO EXCESS LWOP
/ / IN PAY STATUS AT END OF WAITING PERIOD
/ /. LWOP STATUS AT END OF WAITING PERIOD
CLERKS INITIALS AUDITED BY

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS
OF AN ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE: Ned P. Holman DATE: 26-X-62

WJK

PAY CHANGE NOTIFICATION

Form 560 Obsolete Previous Edition

10740

AEG, 11 AUG 61

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)
007667	BUSTOS-VIDELA C Z BUSTOSVIDELA C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO DA YR)	5. CATEGORY OF EMPLOYMENT
NAME CHANGE FROM* CHARLOTTE L. ZEBRUNG - CORRECTION**	06 12 61	REGULAR

6. FUNDS	V TO V / CF TO V	V TO CF / CF TO CF	7. COST CENTER NO. CHARGEABLE	8. CSC OR OTHER LEGAL AUTHORITY
X			2235 1000 1000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP WH BRANCH 3 MEXICO SECTION	WASH., D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
OPS OFFICER	0607	D

14. CLASSIFICATION SCHEDULE (GS, WB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 2	9215

18. REMARKS

* BY MARRIAGE ON 18 MARCH 61.
** THIS ACTION CORRECTS SF 1150 EFF 12 JUNE 61 ITEM # 2, NAME, WHICH READ BUSTOSVIDELA C Z TO READ BUSTOS-VIDELA C Z, FOR PAYROLL PURPOSE ONLY.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 Employ. Code	21 OFFICE CODING (NUMERIC / ALPHABETIC)	22 STATION CODE	23 INTEGREE CODE	24 Code	25 DATE OF BIRTH (MO DA YR)	26 DATE OF GRADE	27 DATE OF LEI
						01 12 29		

28. NTE EXPIRES	29. SPECIAL REFERENCE	30 RETIREMENT DATA (1 - CSC, 2 - FICA, 3 - NONE)	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA	EOD DATA	33 SECURITY REQ NO	34 SEX

35 VET PREFERENCE (0 - NONE, 1 - 5 PT, 2 - 10 PT)	36 SERV. COMP. DATE	37 LONG COMP DATE	38 MIL. SERV. CREDIT (1 - YES, 2 - NO)	39 FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO

41 PREVIOUS GOVERNMENT SERVICE DATA	42 LEAVE CAT. CODE	43 FEDERAL TAX DATA	44. STATE TAX DATA

SIGNATURE OR OTHER AUTHENTICATION

POSTED
08/22/61 VK

Form 1150 8-59 Obsolete Previous Editions

SECRET

AES: 12 JUNE 61

SECRET
(When Filled In)

OFF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)
007667	BUSTOSVIDELA C Z

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE (MO. DA. YR.)	5. CATEGORY OF EMPLOYMENT
NAME CHANGE FROM* CHARLOTTE L. ZEHRUNG	06 12 61	REGULAR

6. FUNDS	V TO V / CF TO V	V TO CF / CF TO CF	7. COST CENTER NO. CHARGEABLE	8. CSC OR OTHER LEGAL AUTHORITY
X			1235 1000 1000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP WH BRANCH 3 MEXICO SECTION	WASH., D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION
OPS OFFICER	0607	D.

14. CLASSIFICATION SCHEDULE (GS, WB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 2	9215

18. REMARKS
*BY MARRIAGE. 18 MARCH 1961

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. Employ Code	21. OFFICE CODING (NUMERIC / ALPHABETIC)	22. STATION CODE	23. INTEGREE CODE	24. Hdqtrs Code	25. DATE OF BIRTH (MO DA YR)	26. DATE OF GRADE	27. DATE OF LEI
53	10					01 12 29		

28. STE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA (1 - CSC, 2 - FICA, 3 - NONE / CODE)	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA (TYPE / MO. DA. YR.)		33. SECURITY REQ NO.	34. SEX
					EOD DATA		

35. VET PREFERENCE (CODE: 0 - NONE, 1 - 5 PT, 2 - 10 PT)	36. SERV. COMP DATE	37. LONG COMP. DATE	38. MIL SERV CREDIT/LEO (1 - YES, 2 - NO / CODE)	39. FEGLI / HEALTH INSURANCE (CODE: 0 - WAIVER, 1 - YES / HEALTH INS CODE)	40. SOCIAL SECURITY NO

41. PREVIOUS GOVERNMENT SERVICE DATA (CODE: 0 - NO PREVIOUS SERVICE, 1 - NO BREAK IN SERVICE, 2 - BREAK IN SERVICE (LESS THAN 12 MOS), 3 - BREAK IN SERVICE (MORE THAN 12 MOS))	42. LEAVE CAT CODE	43. FEDERAL TAX DATA (FORM EXECUTED 1 - YES, 2 - NO / CODE / NO TAX EXEMPTIONS)	44. STATE TAX DATA (FORM EXECUTED 1 - YES, 2 - NO / CODE / NO TAX EXEMP / STATE CODE)

SIGNATURE OR OTHER AUTHENTICATION

POSTED
06/14/61 WK

Form 1150 Obsolete Previous Editions

SECRET

SECRET
(When Filled In)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
107667	ZEHRUNG CHARLOTTE	DDP/WH 3 V-20	

5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	WSI	LBI	ADJ.
GS 12	1	$ 8,955	12/13/59	12	2	$ 9,215	06/11/61			

8. Remarks and Authentication

/X/ NO EXCESS LWOP

/ / IN PAY STATUS AT END OF WAITING PERIOD

/ / IN LWOP STATUS AT END OF WAITING PERIOD

E. D. ECHOLS

PAY CHANGE NOTIFICATION

Form 560 7-60 Obsolete Previous Edition

SECRET

(4-51)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
01	ZEHRUNG CHARLOTTE	107667	46 13	GS-12 1	$ 8,330	$ 8,955

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

PAS: 11 DEC 1959

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth Mo.	Da.	Yr.	4. Vet. Pref. Code	5. Sex	6. CS-EOD Mo.	Da.	Yr.
107667	ZEHRUNQ CHARLOTTE	01	12	29	0	F 2	08	27	51

7. SCD Mo.	Da.	Yr.	8. CSC Retmt. Code	9. CSC Or Other Legal Authority	10. Apmt. Affidav. Mo.	Da.	Yr.	11. FEGLI Code	12. LCD Mo.	Da.	Yr.	13. Code
04	02	51	1	50 USCA 403 J					08	27	51	2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
DDP WH BRANCH 111 MEXICO SECTION	4613	WASH., D. C.	75013

16. Dept.-Field Code	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series
2	I.O. FI	0521	GS	0136.51

21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade Mo. Da. Yr.	25. PSI Due Mo. Da. Yr.	26. Appropriation Number
11 4	$ 7750	DI	04 10 55	04 06 58	8 3500 20

ACTION

27. Nature Of Action	Code	28. Eff. Date Mo. Da. Yr.	29. Type Of Employee	Code	30. Separation Data
PROMOTION	30	12 13 59	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
DDP WH BRANCH 111 MEXICO SECTION	4613	WASH., D.C.	75013

33. Dept.-Field Code	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series
2	OPS OFCR	0607	GS	0136.01

38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade Mo. Da. Yr.	42. PSI Due Mo. Da. Yr.	43. Appropriation Number
12 1	$ 8330	DI	12 13 59	06 11 61	0235 1000 1000

44. Remarks

LOGGED
1-7-60
[illegible]

FORM NO. 1150 1 MAR 57

12-15-59

SECRET

(4)

SECRET
(WHEN FILLED IN)

1. EMP SERIAL NO.	2. NAME	3. ASSIGNED ORGAN.	4. FUNDS	5. ALLOTMENT
107667	ZEHRUNG CHARLOTTE	DDP/WH 3	V-20	

6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE MO	DA	YR	GRADE	STEP	SALARY	EFFECTIVE DATE MO	DA	YR
GS 11	3	$ 7,510	04	06	58	GS 11	4	$ 7,750	10	04	59

TO BE COMPLETED BY THE OFFICE OF COMPTROLLER

8. CHECK ONE [X] NO EXCESS LWOP [ ] EXCESS LWOP
IF EXCESS LWOP, CHECK FOLLOWING:
[ ] IN PAY STATUS AT END OF WAITING PERIOD
[ ] IN LWOP STATUS AT END OF WAITING PERIOD

9. NUMBER OF HOURS LWOP

10. INITIALS OF CLERK

11. AUDITED BY

TO BE COMPLETED BY THE OFFICE OF PERSONNEL

12. TYPE OF ACTION
[ ] P.S.I. [ ] S.S.I. [ ] PAY ADJUSTMENT

13. REMARKS

14. AUTHENTICATION

C. M. STEWART

PAY CHANGE NOTIFICATION

FORM 8-59 560 OBSOLETE PREVIOUS EDITION REPLACES FORM 560a AND 560b. SECRET OFFICIAL PERSONNEL FOLDER (4)

IN LIEU OF FORM 1150 THIS NOTIFICATION EFFECTS RESLOTTING RESULTING FROM R-20-250

SER #	NAME	SD	OLD SLOT	NEW SLOT	DATE
107667	ZEHRUNG CHARLOTTE	DI	0521	321	04/28/59

SECRET

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE 12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
ZEHRUNG CHARLOTTE	107667	GS-11-3	$ 6,820	$ 7,510

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

SECRET

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO	2. NAME	3. ASSIGNED ORGAN.	4. FUNDS	5. ALLOTMENT
107667	ZEHRUNG CHARLOTTE	DDP/WH	V-20	

6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE MO.	DA.	YR.	GRADE	STEP	SALARY	EFFECTIVE DATE MO.	DA.	YR.
GS 11	2	$ 6,605	10	07	56	GS 11	3	$ 6,820	04	06	58

TO BE COMPLETED BY THE OFFICE OF COMPTROLLER

8. CHECK ONE ☑ NO EXCESS LWOP ☐ EXCESS LWOP
IF EXCESS LEAVE LWOP, CHECK FOLLOWING:
☐ IN PAY STATUS AT END OF WAITING PERIOD
☐ IN LWOP STATUS AT END OF WAITING PERIOD

9. NUMBER OF HOURS LWOP

10. INITIALS OF CLERK

11. AUDITED BY

TO BE COMPLETED BY THE OFFICE OF PERSONNEL

12. PROJECTED SALARY RATE AND EFFECTIVE DATE					
GRADE	STEP	SALARY	MO	DA	YR

13. REMARKS

14. AUTHENTICATION

[illegible]
G. M. STEWART

PERIODIC STEP INCREASE - AUTHENTICATION

FORM NO. 560b
1 MAR. 58

SECRET

PERSONNEL FOLDER (4)

14-00000

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

HCH 3 APRIL 58

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth Mo. Da. Yr.	4. Vet. Pref. None-0 5 Pt-1 10 Pt-2 / Code	5. Sex	6. CS-EOD Mo. Da. Yr.
107667	ZEHRUNG CHARLOTTE	01 12 29	0	F 2	08 27 51

7. SCD Mo. Da. Yr.	8. CSC Retmt. Yes-1 No-2 / Code	9. CSC Or Other Legal Authority	10. Apmt. Affidav. Mo. Da. Yr.	11. FEGLI Yes-1 No-2 / Code	12. LCD Mo. Da. Yr.	13. Yes-1 No-2 / Code
04 02 51	1	50 USCA 403 J			08 27 51	2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
DDP WH BRANCH III MEXICO SECTION	4613	WASH D C	75013

16. Dept. - Field (Dept - 2, USfld - 4, Frgn - 6) Code	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series
2	REPORTS OFF	0072.01	GS	0132.44

21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade Mo. Da. Yr.	25. PSI Due Mo. Da. Yr.	26. Appropriation Number
11 2	$ 6605	D1	04 10 55	04 06 58	8 3500 20

ACTION

27. Nature Of Action	Code	28. Eff. Date Mo. Da. Yr.	29. Type Of Employee	Code	30. Separation Data
REASSIGNMENT	56	04 03 58	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
DDP WH BRANCH III MEXICO SECTION	4613	WASH., D. C.	75013

33. Dept. - Field (Dept - 2, USfld - 4, Frgn - 6) Code	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series
2	I.O. FI	0521	GS	0136.51

38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade Mo. Da. Yr.	42. PSI Due Mo. Da. Yr.	43. Appropriation Number
11 2	$ 6605	D1	04 10 55	04 06 58	8 3500 20

44. Remarks

POSTED
5/1/58

FORM NO. 1150
1 MAR 57

SECRET

(4)

14-00000

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

MYL

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth (Mo. Da. Yr.)	4. Vet. Pref. (None-0, 5 Pt-1, 10 Pt-2) Code	5. Sex	6. CS-EOD (Mo. Da. Yr.)
107667	ZEHRUNG CHARLOTTE	01 12 29	0	F 2	08 27 51

7. SCD (Mo. Da. Yr.)	8. CSC Retmt. (Yes-1 No-2) Code	9. CSC Or Other Legal Authority	10. Apmt. Affidav. (Mo. Da. Yr.)	11. FEGLI (Yes-1 No-2) Code	12. LCD (Mo. Da. Yr.)	13. Mil. Serv. Credit. Ltd. (Yes-1 No-2) Code
04 02 51	1	50 USCA 403 J			08 27 51	2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
DDP WH BRANCH 11 ARGENTINA SECTION		WASH D C	

16. Dept. - Field (Dept-2, USfld-4, Frgn-6) Code	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series
2	REPORTS OFFICER	313	GS	0132.44

21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade (Mo. Da. Yr.)	25. PSI Due (Mo. Da. Yr.)	26. Appropriation Number
11 2	$ 6605	DI			8 3500 20

ACTION

27. Nature Of Action	Code	28. Eff. Date (Mo. Da. Yr.)	29. Type Of Employee	Code	30. Separation Data
REASSIGNMENT	56	12 01 57	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
DDP WH BRANCH 111 MEXICO SECTION	4613	WASH D C	75013

33. Dept. - Field (Dept-2, USfld-4, Frgn-6) Code	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series
2	REPORTS OFF	0072.01	GS	0132.44

38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade (Mo. Da. Yr.)	42. PSI Due (Mo. Da. Yr.)	43. Appropriation Number
11 2	$ 6605	DI	04 10 55	04 06 58	8 3500 20

44. Remarks

POSTED
10DEC57

FORM NO. 1150
1 MAR 57

SECRET

(4)

SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A — GENERAL INFORMATION

1. EMPLOYEE NUMBER	2. NAME (Last, first, middle)	3. DATE OF BIRTH	4. SEX	5. GRADE	6. SD
007667	Bustos-Videla, Charlotte Z.	12 Jan 29	F	GS-13	D

7. OFFICIAL POSITION TITLE	8. OFF/DIV/BR OF ASSIGNMENT	9. CURRENT STATION	10. HQ CD
Operations Officer	DDO/WH/1		

11. TYPE OF APPOINTMENT: CAREER / RESERVE / CONTRACT / OTHER (Spec.) / TEMPORARY

12. TYPE OF REPORT: ANNUAL / REASSIGNMENT / SPECIAL

13. REPORTING PERIOD (from-to-): XXXXX 1 August 1972 - 30 April 1973

14. DATE REPORT DUE IN O.P.

SECTION B — QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C — PERFORMANCE EVALUATION

- **U—Unsatisfactory** — Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
- **M—Marginal** — Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
- **P—Proficient** — Performance is satisfactory. Desired results are being produced in the manner expected.
- **S—Strong** — Performance is characterized by exceptional proficiency.
- **O—Outstanding** — Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Functions as Chief of the WH/1/SA and Cuba Section, supervising one case officer, one IA and one secretary.	S
SPECIFIC DUTY NO. 2: Analyzes all traffic pertaining to Branch and Station SA and Cuban Operations, performs all operational support, project actions, correspondence, coordination, memoranda and file maintenance.	O
SPECIFIC DUTY NO. 3: Prepares studies, file analyses and special reports such as budget and program call and correspondence with the White House.	O
SPECIFIC DUTY NO. 4	
SPECIFIC DUTY NO. 5	
SPECIFIC DUTY NO. 6	

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER: S

Form 45 6-72 OBSOLETE PREVIOUS EDITIONS

CLASSIFICATION
SECRET

E2 IMPDET CL BY 055272 3 MAY 1973

SECRET

CLASSIFICATION

SECTION D — NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

In the 8 months during which she was under my supervision, Mrs. Bustos has performed in that same hard-working, highly-productive style which has become her trademark over the years. She understands the intelligence process from start to finish and is personally experienced with each step along the way, save the agent handling aspects. She excels in each phase of the work.

As chief of the Branch SA and Cuban activities section, she has once again demonstrated her mastery over her assigned duties. She is a sound, dependable, yet imaginative and energetic operations officer, whose performance leaves little to be desired. While she had had little previous supervisory experience, she has in this assignment demonstrated exemplary supervisory ability. Notwithstanding her drive, tenacity and attention to detail, she is a popular co-worker, is receptive to guidance and is sensitive to, and responsive to the needs of her subordinates.

In her performance of specific duty No. 2, she has brought to bear upon her daily duties her broad experience, high intelligence and good operational sense, functioning with practically no need of close supervision. It is comforting to know that an assignment given to this employee is always done promptly, professionally and cheerfully.

Her adaptability was demonstrated in her specific duty No. 3. Despite the press of normal daily activity, she was often called upon to produce "crash"

(continued)

SECTION E — CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, C AND D OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
21 May 1973	[signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
8		
DATE	**OFFICIAL TITLE OF SUPERVISOR**	**TYPED OR PRINTED NAME AND SIGNATURE**
21 May 1973	DC/WH/1	Raymond J. Swider [signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL The rater has written an accurate and thorough evaluation of Mrs. Bustos. I concur without reservation in the ratings provided subject. She is an exceptional officer. Her ability to perform a variety of assignments in Headquarters and the Field has measured up to an outstanding record. Her work with subordinates clearly indicate she is a good supervisor. Mrs. Bustos performs all facets of her work in an exemplary manner and in my judgement rates in the upper percentile in the A Category.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
21 May 1973	C/WH/1	John C. Murray [signature]

CLASSIFICATION

SECRET

Narrative Comments (continued): (Charlotte Z. Bustos-Videla)

papers for the Branch because of her innate talents and established reliability. She never failed to impress her supervisor with her production, writing ability and energy. Her overall performance is clearly in excess of her grade level.

In terms of true cost and security-consciousness, she must also be considered very strong because she has a positive and aggressive attitude towards these subjects. It is with deep regret that the Branch parts with this employee who now moves up to the Division front office staff.

C-O-N-F-I-D-E-N-T-I-A-L

Covert Action Operations Seminar No. 2-73
35 hours, full time

Participant : Bustos-Videla, Charlotte

Office : WH

Year of Birth: 1929

Service Designation: D

Grade : GS-13

No. of Students : 20

EOD Date : 08/51

COURSE OBJECTIVES, CONTENT AND METHODS

The objective of the Seminar is to give the participant a familiarization with the major fields of covert action. These are viewed as:

Political Operations, including Propaganda;

Operations Against Priority Targets and Denied Areas.

("Priority targets" is taken to include Soviet Bloc, Chinese Communist, Cuban, and North Vietnamese officials and other personnel in third countries, and other designated targets)

The Seminar includes a discussion of the "political animal" and an analytical look at the political personality.

The technique of instruction is one of talks by Operations Officers experienced in various specific kinds of operation, followed by questions and discussion. Participants are encouraged and expected to ask questions and engage in the discussions, drawing upon and relating their experience to that under discussion. One of the important values to be gained from the Seminar is this exchange of experience.

ACHIEVEMENT RECORD

This is a certificate of attendance. No further assessment of individual capacity or performance is made in this course.

FOR THE DIRECTOR OF TRAINING:

Richard A. Fuller
Richard A. Fuller
Chief Instructor

2/23/73
Date

C-O-N-F-I-D-E-N-T-I-A-L

CONFIDENTIAL

TRAINING REPORT

Midcareer Course No. 34

Student	**: Bustos-Videla, Charlotte**	**Date**	**: 11/5-12/22/72**
Year of Birth: 1929		**Office**	**: WH/1**
Grade	**: 13**	**Service Designation: D**	
		No. of Students	**: 30**

COURSE OBJECTIVES -- CONTENT AND METHODS

The Midcareer Course is designed to enable potential executive officers to develop and widen their understanding of management practices, of the Agency and the Intelligence Community, and of the Government's involvement in international affairs.

The Course consists of three major segments of varying lengths. The topics covered through lectures, seminars, group discussions and field trips are:

1. Effective managerial behavior as derived through study of the Managerial Grid.

2. The functions, relationships and problems of various Agency components and of members of the Intelligence Community.

3. Selected elements of national power and current developments in key international affairs.

ACHIEVEMENT RECORD

No evaluation of the student is made during the Course, and no final grade is given upon course completion.

FOR THE DIRECTOR OF TRAINING:

[signature] 22 DEC 1972

John C. Merfit Date
Midcareer Course Chairman

Classified by: 17-1626
EX-2, APDCI, WSISM

CONFIDENTIAL

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle): Bustos-Videla, Charlotte Z.	2. DATE OF BIRTH: 12 Jan 29	3. SEX: F	4. GRADE: GS-13	5. SD: D
6. OFFICIAL POSITION TITLE: Operations Officer	7. OFF/DIV/BR OF ASSIGNMENT: DDP/WH/1		8. CURRENT STATION: Mexico City	

9. CHECK (X) TYPE OF APPOINTMENT: XX CAREER | RESERVE | TEMPORARY | CAREER-PROVISIONAL (See instructions - Section C) | SPECIAL (Specify):

10. CHECK (X) TYPE OF REPORT: INITIAL | XX REASSIGNMENT SUPERVISOR | X ANNUAL | REASSIGNMENT EMPLOYEE | SPECIAL (Specify):

11. DATE REPORT DUE IN O.P.:

12. REPORTING PERIOD (From- to-): 1 January - 31 July 1972

SECTION B — PERFORMANCE EVALUATION

U-Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
M-Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.
P-Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
S-Strong	Performance is characterized by exceptional proficiency.
O-Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Prepares operational target studies on PBRUMEN officials and assists in the planning of operations against those targets.	O
SPECIFIC DUTY NO. 2: Screens all agent and technical reports dealing with PBRUMEN targets for operational and positive information and puts in retrievable form.	S
SPECIFIC DUTY NO. 3: Assists Case Officers in preparation of operational reports by doing all basic research such as tracing and file reviews and presents the results in exploitable form.	O
SPECIFIC DUTY NO. 4: Prepares draft intelligence reports from raw agent reports, technical operations and defector debriefings.	O
SPECIFIC DUTY NO. 5: GOA/DT&O Project Officer	S
SPECIFIC DUTY NO. 6: Management of the PBRUMEN section files. 12 OCT 1972	S

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	S

FORM 45 OBSOLETE PREVIOUS EDITIONS

SECRET

SECRET
(When Filled In)

SECTION C — **NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

In reviewing my previous fitness report and those of my predecessors, on this fine officer, I find myself hard put not to repeat what has been said so often before. She has been the backbone of this section and of those where she has worked previously. Her work has always shown excellent judgement and ingenuity. A self-starter with tremendous drive and discipline, the amount of work she has produced has been prodigious. An excellent team worker, she has never shirked when - as so often happens - she is asked to take on additional work or work on a matter outside of her regular field. While forceful, she is diplomatic and tactful and is able to present suggestions and criticisms in a pleasant manner. She is one of the most dedicated persons I have met in the Organization, and exceptionally dependable. While, as a woman and a Specialist, she has had little opportunity to handle agents she has done very well with those we have given her to handle. She has showed great ability in the training of two transcribers and in the debriefing of two female agents and their husbands. This is in large part due to her in-depth knowledge of the targets this section is working on. The past few months have been difficult, requiring the complete reorganization of this Section and the termination of the majority of our assets. Under this stress, she has performed in her usual outstanding manner. Perhaps, even a little better. Her handling of a great deal of file work has been excellent, probably in part because she was the one who set it up and has maintained it in its present very good state. (continued)

SECTION D — **CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
7 Aug 1972	/s/ Charlotte Z. Bustos-Videla

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	**OFFICIAL TITLE OF SUPERVISOR**	**TYPED OR PRINTED NAME AND SIGNATURE**
7 August 1972	Operations Officer	/s/ John M. Burke

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Without any hesitation I concur with the outstanding ratings above. Subject is now up for rotation and we will miss her immensely. For years she has dedicated her entire time to her job which she has done so well. She has been creative, thorough and accurate. Although she has not had supervisory experience at this station, she has performed in a manner which clearly reflects that she would have no problem with supervising. A truly outstanding employee with growth potential.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
7 Aug 1972	DCOS	/s/ George A. Fill [redacted]

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(CONTINUED)

SECTION C NARRATIVE COMMENTS

The one criticism of this Officer's work that I and others have made in the past still stands. She tries to do everything and somethings in this business just don't deserve the attention she gives them.

I have no personal knowledge of her supervisor abilities, but believe she is a natural leader.

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Bustos-Videla, Charlotte Z.	12 Jan 29	F	GS-13	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Operations Officer	DDP/WH/1	Mexico City

9. CHECK (X) TYPE OF APPOINTMENT						10. CHECK (X) TYPE OF REPORT			
X	CAREER		RESERVE		TEMPORARY		INITIAL		REASSIGNMENT SUPERVISOR
	CAREER-PROVISIONAL (See Instructions - Section C)					XX	ANNUAL		REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):						SPECIAL (Specify):		

11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From- to-)
	January 1971 - December 1971

SECTION B — PERFORMANCE EVALUATION

U—Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
M—Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.
P—Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
S—Strong	Performance is characterized by exceptional proficiency.
O—Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Prepares operational target studies on PBRUMEN officials and assists in the planning of operations against these targets.	O
SPECIFIC DUTY NO. 2: Screens all raw reports dealing with PBRUMEN targets for operational and positive intelligence.	S
SPECIFIC DUTY NO. 3: Conducts name checks, file reviews, prepares finished memos, cables, and dispatches. Assists Case Officers in preparation of operational reports.	O
SPECIFIC DUTY NO. 4: Prepares draft intelligence reports from raw agent reports, technical operations and defector debriefings.	O
SPECIFIC DUTY NO. 5: Handles miscellaneous special projects for the Station: screening and routing to all sections daily audio take; operational reporting and project responsibility for COA/D&TO project.	S
SPECIFIC DUTY NO. 6:	

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	S

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SECRET

Reviewed by OP/SPD/PPB

14-00000

SECRET
(When Filled In)

SECTION C — **NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

DEC 27 8 55 AM '71

This supervisor has worked with a variety of Intelligence Assistants. Many were good, but none compared with this Subject. She is the most thorough and fastest working IA I have met. Her capacity for hard work and long hours is prodigious. Her knowledge of operational matters is equal to that of most case officers. She has an operationally creative mind and has made many excellent suggestions for the improvement of the section's work. Additionally, her command of the Spanish language enhances all of the above abilities. This officer has found her very pleasant to work with. She has a unique ability to make constructive criticism in a tactful manner.

If this Subject has a weakness, it was pointed out by the reviewing officer in the last fitness report when he said, "in her voracious appetite for all kinds of facts (she) can at times put undue emphasis on them, including factual minutiae as against equally important but more elusive subjective factors.

Because of her outstanding performance and abilities the Subject will be given some activity handling agent personnel, during the forthcoming year.

The Subject's continued fine performance since her last promotion merits special consideration by the Promotion Board.

SECTION D — **CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
9 December 1971	/s/ Charlotte Z. Bustos-Videla

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	**OFFICIAL TITLE OF SUPERVISOR**	**TYPED OR PRINTED NAME AND SIGNATURE**
9 December 1971	Ops Officer	/s/ John M. Burke

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the above ratings and comments. Subject performs all the tasks outlined above in a very professional and methodical manner. One does not even sense that the work is going on until the finished product is produced. It is always excellent. We count heavily on her thoughts and ideas in all operational studies and considerations. She is ops oriented and has an excellent bank of information to call on when necessary. She is pleasant and has the respect of her co-workers as well as her supervisors. Her abilities are varied and she can be counted on to perform extremely well regardless of assignment or target. We will be losing this fine officer soon and we will be hard put to find someone who will be able to replace her.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
9 December 1971	Deputy Chief of Station	/s/ George A. Fill

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
BUSTOS-VIDELA, CHARLOTTE Z.	12 Jan. 29	F	GS-13	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Operations Officer	DDP/WH/Br 1	Mexico City

9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
X	CAREER	RESERVE / TEMPORARY		INITIAL	REASSIGNMENT SUPERVISOR
	CAREER-PROVISIONAL (See instructions - Section C)		XX	ANNUAL	REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):			SPECIAL (Specify):	

11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From- to-)
	1 January - 31 December 1970

SECTION B — PERFORMANCE EVALUATION

- **U—Unsatisfactory** — Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
- **M—Marginal** — Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.
- **P—Proficient** — Performance is satisfactory. Desired results are being produced in the manner expected.
- **S—Strong** — Performance is characterized by exceptional proficiency.
- **O—Outstanding** — Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1 Prepares operational target studies on PBRUMEN officials of interest and helps in the preparation of operational planning re target personnel.	O
SPECIFIC DUTY NO. 2 Screens the raw reports from technical operations and agents for operationally useful information.	O
SPECIFIC DUTY NO. 3 Provides operational and administrative support for station PBRUMEN activities. This includes name checks, file reviews, preparation of memos, cables and dispatches, and helps in the preparation of project reports, outlines, and renewals.	O
SPECIFIC DUTY NO. 4 Supervises the handling of the station PBRUMEN watch-list and in general monitors travel of interest to and from PBRUMEN for our station, Headquarters and other stations.	S
SPECIFIC DUTY NO. 5 Helps the station intelligence chief in the preparation of finished intelligence reports from a PBRUMEN refugee debriefing center (only part of the reporting period).	S
SPECIFIC DUTY NO. 6 Handles miscellaneous special projects for the station in addition to her PBRUMEN duties (examples: organization of station watchlists during a presidential visit, screening certain raw reports for whole station, preparation of OOA/DTO project renewal).	S

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	O

SECRET
(When Filled In)

SECTION C — **NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject worked most of the year in the station PBRUMEN section. She was clearly outstanding in collating information from all sources during a recent intensified "PBRUMEN" month, determining as a result the overall pattern of the PBRUMEN mission here, spotting operational leads and updating target studies on all PBRUMEN officials as a result. Her final writeup regarding both new information obtained and the gaps that remain was thorough and useful.

Subject is extraordinarily rapid and efficient in researching for info, organizing files and other material and writing up any kind of resulting memo or dispatch. The same might be said perhaps of some other real pros in the IA field. However, in addition, Subject has a good, tough, operations-oriented mind and positively contributes ideas and suggestions re new operational techniques which the station has used profitably. Subject has natural managerial abilities as recently demonstrated in her organizing TDY help in a station-wide file and watchlist effort in connection with a presidential visit. Her Spanish is more than adequate for reading reports, and handling operational messages in that language. In sum, Subject is a tremendous station asset and would be extremely hard to replace without noting a serious loss in station efficiency.

-continued

SECTION D — **CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
5 March 1971	/s/ Charlotte P. Bustos-Videla

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	**OFFICIAL TITLE OF SUPERVISOR**	**TYPED OR PRINTED NAME AND SIGNATURE**
5 March 1971	Operations Officer	/s/ John Issminger

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Although in my opinion there is an excessive use of "outstanding" by the rating officer, I am in accord with his narrative comments. Subject is definitely more than an IA and has performed as such when the station has required an individual with in-depth knowledge of station procedures, operational awareness combined with an ability to prepare studies in a short period of time. She's thorough, concise and rapid. One of our hardest workers and most dependable employees.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
25 March 1971	Deputy Chief of Station	/s/ George A. Fill

SECRET

SECTION C NARRATIVE COMMENTS -continued

Three rather personalized comments might add meaning to this fitness report. Anyone, particularly a female, fitting the above description of efficiency and achievement can be, and often is a little overbearing and difficult to work with as a person. Subject, withall, is a pleasant personality who knows how to make her contributions and comments in a forthright but tactful manner. Secondly, and this one is a little hard to say, Subject in her voracious appetite for all kinds of facts can at times put undue emphasis on them including factual minutiae as against equally important but more elusive subjective factors. Thirdly, this rating officer has personally observed Subject only working on station premises at an office job, and frankly has no idea how she might function in outside operational work (cultivating people, working under outside cover).

SECRET/RYBAT

MEMORANDUM FOR THE RECORD

CHARLOTTE BUSTOS VIDELA

SUBJECT: Overall Outstanding Rating on [redacted]: Method of Recognition

1. This memo is being written in accordance with paragraph three of Book Dispatch 5273 of 12 April 1966.

2. [redacted] was last granted a Quality Step Increase about a year ago in recognition of her very fine performance. It is a little early to repeat that kind of recognition even though it is a most logical and meaningful means to show recognition of her outstanding work.

3. Consideration should be given to an appropriate occasion in the fairly near future to grant another QSI to [redacted].

SECRET/RYBAT

Reviewed by OP/SPD/PPB

14-00000

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
BustosVidela Charlotte Z	12 Jan 29	F	GS-13	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Ops Officer	DDP/WH/Branch 1	Mexico City

9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT	
CAREER		INITIAL	
RESERVE		XX ANNUAL	
TEMPORARY		REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See instructions - Section C)		REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):		SPECIAL (Specify):	

11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From- to-)
28 February 1970	1 August 1969 - 31 December 1969

SECTION B — PERFORMANCE EVALUATION

W - Weak: Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.

A - Adequate: Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.

P - Proficient: Performance is more than satisfactory. Desired results are being produced in a proficient manner.

S - Strong: Performance is characterized by exceptional proficiency.

O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Complete reorganization of Station files, including development of new procedures, revision of file categories, consolidation, purging and destruction.	O
SPECIFIC DUTY NO. 2: Provides overall guidance to Station and TDY personnel engaged in reorganization of Station files. Supervision of Secretary-Receptionist.	S
SPECIFIC DUTY NO. 3: Special assistance to COS/DCOS in revamping the paper flow within the Station and between the Station and other Government agencies.	S
SPECIFIC DUTY NO. 4: Preparation of special studies for the COS/DCOS concerning the effectiveness of Station paper handling procedures, personnel economies related thereto and the improvement of Station	
SPECIFIC DUTY NO. 5: utilization of manpower, space and funds as a result of the reorganization of Station Registry functions and personnel.	S
SPECIFIC DUTY NO. 6:	

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER: S

FORM 4-65 45 USE PREVIOUS EDITIONS

SECRET

SECRET
(When Filled In)

SECTION C — **NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

In July 1969 Subject was transferred from the Cuba Section to the Station front office to serve as an executive assistant to the COS with special responsibility for ensuring that the paper flow of the Station remained under effective control during the period of transition resulting from the assignment here of several senior officers. This transition period necessitated or gave rise to a number of changes in the management and administrative areas of the Station. Subject's performance in this assignment under these circumstances was clearly outstanding. Her sound judgement, imagination and responsiveness to guidance not only contributed to maintaining the stability and momentum of the Station but also made possible an early effort to come to grips with many of the problems which an inflated Registry and a highly distinctive records system created for the new Station management team.

During the ensuing six month period, Subject has recommended and implemented a number of changes which have produced a more effective and less costly records system. Paper holdings have been reduced substantially, input has been reduced and now conforms to basic CS procedures and requirements. Personnel savings have been effected and supervisory responsibilities more clearly delineated.

To sum up, Subject has made and continues to make a major contribution in a singularly unsensational area of Station activity. Her advice is sought and appreciated not only by the COS and myself, but by other

(CONTINUED)

SECTION D — **CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
15 January 1970	/s/ Charlotte Bustos-Videla

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
6 months		
DATE	**OFFICIAL TITLE OF SUPERVISOR**	**TYPED OR PRINTED NAME AND SIGNATURE**
15 January 1970	DCOS	/s/ Paul V. Harwood

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL: It would be difficult to overstate the contribution made by Subject to this Station during the past six month period, and I concur fully in the ratings and comments of the Rating Officer. I might add that Subject is one of the more versatile, conscientious and productive employees with whom I have worked in this organization, and that in addition to the administrative/management role outlined above, continued to provide valuable operational/analytical assistance to the Cuban and other operational sections of the Station. The initiative and imagination shown by Subject in the very complicated administrative management assignment have been particularly commendable and her complete familiarity with the country, the language, and the background of the Station has been invaluable during this period of change.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
15 January 1970	COS	/s/ James B. Noland

SECRET

SECTION C NARRATIVE COMMENTS CONTINUED

personnel who appreciate her personal and professional qualities.
Subject is aware that her current assignment is an unusual one and that she soon may have worked herself out of her current job. Since she speaks fluent Spanish, has a unique ability to get along with people and to get things done, there will be no problem in assigning her back into a position more closely supporting operations. Our operations are certain to benefit thereby.

14-00000

(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
BUSTOSVIDELA, Charlotte Z.	12 Jan 29	F	13	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Ops Officer	DDP/WH/FF/1	Mexico City

9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT	
XX	CAREER		INITIAL
	RESERVE	X	REASSIGNMENT SUPERVISOR
	TEMPORARY		ANNUAL
	CAREER-PROVISIONAL (See instructions - Section C)		REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):		SPECIAL (Specify):

11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From- to-)
October 1969	March to August 1969.

SECTION B — PERFORMANCE EVALUATION

W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.

A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.

P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.

S - Strong Performance is characterized by exceptional proficiency.

O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1 Until she was called to other duties in the front office of the Station, did analysis on FBRUMEN targets of Station interest, collated information and prepared studies. 'DC40'	O
SPECIFIC DUTY NO. 2 Screened the raw product of several [illegible] operations and processed intelligence and operational information in close cooperation with two full time senior outside transcribers whom she handled completely.	O
SPECIFIC DUTY NO. 3 Handled the Station FBRUMEN watchlist and travel program, and reported travel information to [illegible] Stations and other customers.	S
SPECIFIC DUTY NO. 4 Provided operational support (file checks, operational reviews, liaison memoranda, etc.) for various Station activities.	S
SPECIFIC DUTY NO. 5 Contributed to the preparation of monthly summaries and project reporting (outlines, renewals, etc.)	O
SPECIFIC DUTY NO. 6 Handled special projects for the Station in addition to her FBRUMEN duties.	O

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	O

FORM 4-65 45 USE PREVIOUS EDITIONS

SECRET

14-00000

SECRET
(When Filled In)

SECTION C	NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject's performance continued during the period under review to deserve high praise. Her enormous appetite for work, her attention to detail, her ability to absorb and digest enormous files and complicated cases, her professionalism and devotion to the duties entrusted to her really deserve the rating of outstanding. Subject speaks good Spanish, has considerable initiative, much experience in analytic work and a genuine talent for administrative work.

In view of her past performance, her record at the Station and her potential, Subject who was recommended for promotion to the GS-14 level should be promoted as soon as possible.

SECTION D — CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
1 August 1969	Charlotte Z. Bustosvidela (signed)

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	**OFFICIAL TITLE OF SUPERVISOR**	**TYPED OR PRINTED NAME AND SIGNATURE**
1 August 1969	Ops. Officer	Francis Sherry (signed)

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject is indeed an exceptional officer who is highly deserving of the foregoing ratings and related accolades. In her new role as executive assistant to the COS she has been invaluable during the difficult and complicated transition from the old regime to the new, and the related reorganization of the Station. Her organizational abilities are unsurpassed by anyone known to the undersigned, and she certainly merits consideration for early promotion.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
1 August 1969	Chief of Station	James B. Noland

SECRET

SECRET
(When Filled In)

Reviewed by OP/PD/EAB

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle): Bustos-Videla, Charlotte	2. DATE OF BIRTH: 12 Jan 1929	3. SEX: F	4. GRADE: GS-13	5. SD: D
6. OFFICIAL POSITION TITLE: Ops Officer	7. OFF/DIV/BR OF ASSIGNMENT: DDP/WH/1		8. CURRENT STATION: Mexico City	

9. CHECK (X) TYPE OF APPOINTMENT

XX	CAREER	RESERVE	TEMPORARY
	CAREER-PROVISIONAL (See instructions - Section C)		
	SPECIAL (Specify):		

10. CHECK (X) TYPE OF REPORT

	INITIAL		REASSIGNMENT SUPERVISOR
XX	ANNUAL		REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):		

11. DATE REPORT DUE IN O.P.

12. REPORTING PERIOD (From- to-): January 1968 - March 1969

SECTION B — PERFORMANCE EVALUATION

- **W - Weak** Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
- **A - Adequate** Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.
- **P - Proficient** Performance is more than satisfactory. Desired results are being produced in a proficient manner.
- **S - Strong** Performance is characterized by exceptional proficiency.
- **O - Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Handles Station PBRUMEN watchlist and travel program and reports travel information to WOFIRM stations and other customers	S
SPECIFIC DUTY NO. 2: Screens the raw product of several technical operations and processes intelligence and operational information in close cooperation with two full time senior transcribers whom she handles completely	O
SPECIFIC DUTY NO. 3: Does analysis on targets of Station interest, collates information and prepares studies	O
SPECIFIC DUTY NO. 4: Contributes to the preparation of monthly summaries and project reporting (outlines, renewals, etc.)	O
SPECIFIC DUTY NO. 5: Provides operational support (file, checks, operational reviews, liaison memoranda, etc. for various Station activities	S
SPECIFIC DUTY NO. 6:	

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	O

SECRET
(When Filled In)

SECTION C — **NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject's performance during the period of over one year under review continued to deserve the rating of Outstanding. Her major contributions during that period were in the fields of operational research and exploitation of information obtained through technical means. She was, during this period, given full responsibility for the handling of two full time senior transcribers including administrative matters. In view of the difficulty of recruiting target personnel the task of fully exploiting information obtained from technical sources is of great importance. Subject handled this task with her usual enormous capability for work, displaying initiative and great professionalism. She continued, in addition, to handle the other tasks listed in this report together with sensative reporting sent by a separate channel, altogether a much heavier workload than is usually carried by one person. She was helped in this by her good knowledge of Spanish, a talent for administrative work, considerable analytic experience and great devotion to her work. Subject should be considered for promotion to the grade of GS-14 at the first opportune moment.

SECTION D — **CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
3 April 69	Charlotte Bustos-Videla /s/

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
19 months	

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
3 April 69	Ops Officer	Francis Sherry /s/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

The reviewing officer fully agrees with the ratings and comments of the rating officer. Subject consistently performs her duties in an outstanding manner, bringing to her job truly exceptional qualities of intelligence, reliability, and good humor. She is one of the most valuable employees in the Station, and the recommendation for her promotion from GS-13 to GS-14 is fully and enthusiastically endorsed.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
3 April 69	COS,	Winston Scott /s/

SECRET

14-00000

S-E-C-R-E-T

TRAINING REPORT

Soviet Bloc Operations Course No. 3 — 5 - 16 June 1967
80 hours, full time

Student : BUSTOS-VIDELA, Charlotte — Office : DDP/WH

Year of Birth: 1929 — Service Designation: D

Grade : GS-13 — No. of Students : 34

EOD Date : August, 1951

COURSE OBJECTIVES

To orient the student on the special nature of the Clandestine Services' Soviet Bloc target and to train him in the application of clandestine methods for collecting information on, assessing, and preparing recruitment operations against Soviet Bloc personalities.

ACHIEVEMENT RECORD

This is a certificate of attendance. No evaluation is made of individual performance in the course.

FOR THE DIRECTOR OF TRAINING:

Russell A. Langelle — Date
Instructor, OTR

S-E-C-R-E-T

14-00000

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Bustos-Videla, Charlotte	12 Jan 1929	F	GS-13	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Ops Officer	DDP/WH/1	Mexico City

9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
X	CAREER	RESERVE / TEMPORARY		INITIAL	REASSIGNMENT SUPERVISOR
	CAREER-PROVISIONAL (See instructions - Section C)		XXX	ANNUAL	REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):			SPECIAL (Specify):	

11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From- to-)
29 February 1968	August 1967 through January 1968

SECTION B — PERFORMANCE EVALUATION

W - Weak: Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.

A - Adequate: Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.

P - Proficient: Performance is more than satisfactory. Desired results are being produced in a proficient manner.

S - Strong: Performance is characterized by exceptional proficiency.

O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Handles Station PBRUMEN program (maintains a watchlist, screens travel documents and reports travel information to WOFIRM stations and other interested customers).	S
SPECIFIC DUTY NO. 2: Screens the raw product of technical operations and processes the intelligence and operational information.	O
SPECIFIC DUTY NO. 3: Does analysis on targets of Station interest, pulling documents together, collating information and preparing studies.	O
SPECIFIC DUTY NO. 4: Helps with the preparation of monthly summaries and project reporting (outlines, renewals etc.).	O
SPECIFIC DUTY NO. 5: Provides operational support (file checks, operational reviews, liaison memoranda etc.) for various Station activities.	S
SPECIFIC DUTY NO. 6:	

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	O

Reviewed by C?/I/J/AB

FORM 45 USE PREVIOUS EDITIONS

SECRET

14-00000

SECRET
(When Filled In)

SECTION C — **NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Since her arrival at this Station, Subject's performance has truly been
cutstanding. She has, on her own initiative, reorganized many of the
operational files and procedures of the PBRUMEN Section. She has made
particularly useful exhaustive analyses of the documents concerning a
number of Station targets not only per request of this Station but also
on her own initiative. She has revamped the Section's travel program,
curtailing the watchlist to more manageable size and expediting the
reporting of travel information to the many customers for such informa-
tion. Her thorough review of the take of several technical operations
has increased their usefulness as well as emphasized their weaknesses.
Subject's [illegible] talent for administra-
tion, her initiative, sharp analytic mind and good knowledge of Spanish
have greatly facilitated the operation of the PBRUMEN Section of this
Station at a time of almost complete personnel change. She has not been
directly involved with the actual running of operations both because
she appears much better suited for the support type work intrusted to
her and because she frankly would not have the time under present
circumstances to do so. Subject is carrying the workload usually
handled by more than one person.

SECTION D — **CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
16 Jan. 1968	/s/ Charlotte Bustos-Videla

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
5 months	

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
16 Jan. 1968	Ops Officer	Francis Sherry

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

The Reviewing Officer fully concurs in the evaluation of Subject by the Rating Officer. Subject consistently turns in a superior performance, whatever her task, and for a Station Chief the only problem she presents is to determine where best to assign her. She is a source of strength to her Section, has the knack of making herself irreplaceable.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
17 January 1968	Chief of Station	Winston D. Miller

SECRET

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle): Bustosvidela, C.Z.	2. DATE OF BIRTH: Jan 1929	3. SEX: F	4. GRADE: GS-13	5. SD: D
6. OFFICIAL POSITION TITLE: Ops Officer	7. OFF/DIV/BR OF ASSIGNMENT: DDP/WH/1		8. CURRENT STATION: HQS	

9. CHECK (X) TYPE OF APPOINTMENT

XX	CAREER		RESERVE		TEMPORARY
	CAREER-PROVISIONAL (See Instructions - Section C)				
	SPECIAL (Specify):				

10. CHECK (X) TYPE OF REPORT

	INITIAL		REASSIGNMENT SUPERVISOR
XX	ANNUAL		REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):		

11. DATE REPORT DUE IN O.P.: 31 Jan 67

12. REPORTING PERIOD (From- to-): 1/66 - 12/66

SECTION B — PERFORMANCE EVALUATION

W - Weak: Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.

A - Adequate: Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.

P - Proficient: Performance is more than satisfactory. Desired results are being produced in a proficient manner.

S - Strong: Performance is characterized by exceptional proficiency.

O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Handles all aspects of 22 FI/CE/Support projects including project actions, logistical and financial support, requirements, guidance and review.	S
SPECIFIC DUTY NO. 2: Handles all matters concerning the agents belonging to these projects including field agents, Contract, Career, and Staff Agents. This includes OA/CSA's, contracts, training, travel, cover and funding.	O
SPECIFIC DUTY NO. 3: Prepares, or helps prepare, miscellaneous memoranda and studies, such as monthly FI achievements, operational program, budget exercises, responses to requests on operations or background info regarding Mexico.	O
SPECIFIC DUTY NO. 4: Routes correspondence, supervises tickler system, maintains project, agent, and subject 201 files.	S
SPECIFIC DUTY NO. 5: Branch records officer.	S
SPECIFIC DUTY NO. 6:	

20 MAR 1967

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER: S

14-00000

OFFICE OF PERSONNEL

SECRET
(When Filled In)

SECTION C	NARRATIVE COMMENTS

FEB 16 10 33 AM '67

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject has continued to perform during the period under review in the same highly competent manner which all who know her have come to expect of her. She continues to put forth her best efforts at all times. She is particularly to be commended for the manner in which she cheerfully accepts onerous tasks, usually with very short deadlines, and invariably comes up with a thoroughly prepared answer within the time allotted. She is efficient, she is fully knowledgeable and capable in her job, she has a friendly, warm, and pleasant personality, and is always ready to respond to her fellow workers with a helping hand. She has no supervisory responsibility per se, but is frequently called upon for guidance to new secretaries and case officers alike and is of real help in such cases. Subject is one of the strongest Headquarters case officers known to rater, and her overall performance certainly borders very closely on being evaluated Outstanding.

SECTION D	CERTIFICATION AND COMMENTS	
1.	BY EMPLOYEE	
	I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE: [illegible]	SIGNATURE OF EMPLOYEE: [signature]	
2.	BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 18	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE: 30 January 1967	OFFICIAL TITLE OF SUPERVISOR: DC/WH/1	TYPED OR PRINTED NAME AND SIGNATURE: J.H.V. Fisher [signature]
3.	BY REVIEWING OFFICIAL	

COMMENTS OF REVIEWING OFFICIAL

Concur. An outstanding officer recognized as such and appreciated by all.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
31 January 1967	C/WH/1	W.J. Kaufman [signature]

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
BUSTOSVIDELA, C. Z.	12 Jan 29	F	GS-12	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Ops Officer	DDP/WH/1	Headquarters

9. CHECK (X) TYPE OF APPOINTMENT

X	CAREER		RESERVE		TEMPORARY
	CAREER-PROVISIONAL (See instructions - Section C)				
	SPECIAL (Specify):				

10. CHECK (X) TYPE OF REPORT

	INITIAL		REASSIGNMENT SUPERVISOR
X	ANNUAL		REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):		

11. DATE REPORT DUE IN O.P.

12. REPORTING PERIOD (From- to-): 1 January - 31 December 1965

SECTION B — PERFORMANCE EVALUATION

- **W - Weak** — Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
- **A - Adequate** — Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.
- **P - Proficient** — Performance is more than satisfactory. Desired results are being produced in a proficient manner.
- **S - Strong** — Performance is characterized by exceptional proficiency.
- **O - Outstanding** — Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Handles all aspects of 22 FI/CE/Support projects including project actions, logistical and financial support, requirements, guidance and review.	O
SPECIFIC DUTY NO. 2: Handles all matters concerning the agents belonging to these projects including field agents, Contract, Career, and Staff Agents. This includes OA/CSA's, contracts, training, travel, cover and funding.	O
SPECIFIC DUTY NO. 3: Prepares, or helps prepare, miscellaneous memoranda and studies, such as monthly FI achievements, operational program, budget exercises, responses to requests on operations or background info regarding Mexico.	S
SPECIFIC DUTY NO. 4: Routes correspondence, supervises tickler system, maintains project, agent, and subject 201 files.	S
SPECIFIC DUTY NO. 5: Branch records officer.	S
SPECIFIC DUTY NO. 6:	

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER: O

25 JAN 1966

FORM 4-62 45 OBSOLETE PREVIOUS EDITIONS.

SECRET

SECRET
(When Filled In)

SECTION C	NARRATIVE COMMENTS

OFFICE OF PERSONNEL

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

JAN 25 12 33 PM '66

Subject continues to render a superior performance. She is efficient, thoroughly knowledgeable, rapid in her work, well organized, and greatly facilitates the smooth functioning of the office. The quality of Subject's work has been recognized fully in previous fitness reports and in previous recommendations for promotion from GS-12 to 13. This high quality of work has continued throughout the period of this fitness report and Subject continues to merit promotion.

SECTION D	CERTIFICATION AND COMMENTS	
1.	BY EMPLOYEE	
	I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE: 20 Jan 66	SIGNATURE OF EMPLOYEE: [signature]	
2.	BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: Four	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE: 20 Jan 1966	OFFICIAL TITLE OF SUPERVISOR: DC/WH/1	TYPED OR PRINTED NAME AND SIGNATURE: J.H.V. Fisher [signature]
3.	BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL		

Reviewing Officer agrees with above report and endorses Subject's fitness for promotion.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
[illegible]	C/WH/1	W.J. Kaufman [signature]

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Santos-Videla, Charlotte L.	12 Jan 1929	F.	GS-12	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Ops Officer	DDP/WH/1	Hqs.

9. CHECK (X) TYPE OF APPOINTMENT: X CAREER; RESERVE; TEMPORARY; CAREER-PROVISIONAL (See Instructions - Section C); SPECIAL (Specify):

10. CHECK (X) TYPE OF REPORT: INITIAL; X ANNUAL; REASSIGNMENT SUPERVISOR; REASSIGNMENT EMPLOYEE; SPECIAL (Specify):

11. DATE REPORT DUE IN O.P.: 31 January 1965

12. REPORTING PERIOD (From- to-): 1 January 1964 - 31 December 1964

SECTION B — PERFORMANCE EVALUATION

W - Weak: Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.

A - Adequate: Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.

P - Proficient: Performance is more than satisfactory. Desired results are being produced in a proficient manner.

S - Strong: Performance is characterized by exceptional proficiency.

O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Handles all aspects of 21 FI/CE/Support projects including project actions, logistical support, requirements, guidance, reviews.	O
SPECIFIC DUTY NO. 2: Handle all matters concerning the agents belonging to these projects, including field agents, Contract, Career and Staff Agents. This includes OA/CSA's, contracts, training, PCS arrangements, cover, funding.	O
SPECIFIC DUTY NO. 3: Prepare, or help prepare, miscellaneous memoranda and studies, such as monthly FI achievements, Operational Program, responses to requests from the Senior Staffs on operations and on Mexico itself.	O
SPECIFIC DUTY NO. 4: Supervise one Intelligence Assistant in the maintenance of a desk tickler system and the agent and subject 201 files at the desk.	O
SPECIFIC DUTY NO. 5: Records Officer	S
SPECIFIC DUTY NO. 6:	

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER: O

23 MAR 1965

FORM 4-62 45 OBSOLETE PREVIOUS EDITIONS.

SECRET

14-00000

SECRET
(When Filled In)

SECTION C	NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

This exceptionally competent and productive officer continued to perform at a level well above that of the GS-13 slot she occupies. While a good deal of her tremendous effectiveness stems from experience, continuity on the job and her natural retentive memory, during the period under review she also demonstrated a flair for, and applied her talents to, the solution of relatively major and complex planning and managerial problems in the area of operational support to Mexico Station activities.

To the list of her previously abudantly acknowledged capacity for hard, effective work, talent for training on the job younger officers, diligence, and versatile ability, this rater would like to add a note of appreciation for her everpresent tactfullness and discretion. No weaknesses affecting her present assignment have been noted; she is very careful and realistic in planning for expenditure of funds.

This officer is separately being recommended for promotion to GS-13.

WH will review this fitness report with others during a special meeting scheduled periodically to consider suitable recommendation for outstanding performance.

SECTION D	CERTIFICATION AND COMMENTS
1.	BY EMPLOYEE
	I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT
DATE: 17 Feb 1966	SIGNATURE OF EMPLOYEE: [signature]
2.	BY SUPERVISOR
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
2-17-66	DC/WH/1	Alfonso Spera [signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
2-17-66	C/WH/1	W. J. Kaufman [signature]

SECRET

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
BUSTOS-VIDELA, Charlotte Z.	12 Jan 1929	F	GS-12	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
Operations Officer	DDP WH 3	Headquarters

9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
X	CAREER		RESERVE		TEMPORARY		INITIAL		REASSIGNMENT SUPERVISOR
	CAREER-PROVISIONAL (See instructions - Section C)			X	ANNUAL		REASSIGNMENT EMPLOYEE
	SPECIAL (Specify):				SPECIAL (Specify):		

11. DATE REPORT DUE IN O.P.: 31 January 1964

12. REPORTING PERIOD (From- to-): 1 January 1963 - 31 December 1963

SECTION B — PERFORMANCE EVALUATION

W - Weak — Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.

A - Adequate — Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.

P - Proficient — Performance is more than satisfactory. Desired results are being produced in a proficient manner.

S - Strong — Performance is characterized by exceptional proficiency.

O - Outstanding — Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Handle Project action, operational correspondence, support for 19 FI and OPs Support type projects, effecting proper coordination with senior staffs, other divisions, and offices.	S
SPECIFIC DUTY NO. 2: Handle clearance actions, contracts, and administrative matters for agents falling under these projects, and for the entire Desk in the absence of the Intell Analyst.	O
SPECIFIC DUTY NO. 3: Prepare miscellaneous memoranda, budgets, and reports requested by Senior Staffs and Division officers from the Mexican desk on Mexican matters in general.	S
SPECIFIC DUTY NO. 4: Supervise the clerical and administrative personnel on the desk (averaging 4) and in general see to the smooth functioning of the desk and the flow of paper.	O
SPECIFIC DUTY NO. 5: Records Officer for WH/3/M	O
SPECIFIC DUTY NO. 6: Assume the responsibilities of C/WH/3/M when the Chief of the desk is absent, signing dispatches and cables, coordinating, and supervising 2 Reports Officers and 5 Case Officers.	P

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	O

14 FEB 1964

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SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject's performance during the rating period has been marked by general excellence. As indicated in Section B her supervision and direction of the Section's work relating to intel support, administration, preparation of special reports, training personnel, etc. is uniformly outstanding. The fact that these functions are handled in addition to her duties as the desk officer for the FI and Ops Support projects, which she performs with unusual competence, serves to illustrate her value to this Section. She has an exceptional ability independently to determine proper courses of action and to initiate action to carry them out. She has a profound understanding of the area operational program and contributions to it are imaginative and constructive.

In the opinion of the rater Subject's performance compares favorably with any GS-13 desk officer within his experience and she performs occasionally at the GS-14 level. Moreover, she carries out her duties cheerfully, loyally and in close and amicable cooperation with her fellow employees at all levels.

In those aspects of her duties which involve cost e.g. the review of operational projects, she has given close attention to the budgetary matters and has frequently suggested ways in which economies on the operations might be effected.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
28 January 1964	[signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	**OFFICIAL TITLE OF SUPERVISOR**	**TYPED OR PRINTED NAME AND SIGNATURE**
1-28-64	C/WH/3/Mexico	[signature] Bernard Reichhardt

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur in the high rating given this employee. She is undoubtedly the ablest employee in this branch in the performance of her particular job.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
29 Jan 1964	C/WH/3	[signature] John M. Whitten

SECRET

(When Filled In)

REPORT ON FOREIGN LANGUAGE APTITUDE AND EXPERIENCE

[illegible]		[illegible]	17 September 19[illegible]
(Name)	(Office)	(Sex)	(Date of testing)

The category checked below is an interpretation of the scores made by the person named above on a battery of foreign language aptitude tests. The relationships between test performance and subsequent training performance of trainees in Agency language training courses are indicated by the graphs next to the aptitude categories. The graphs to the left are for women and the graphs to the right are for men. From these graphs you can read for each aptitude category the probability that a person in that category will perform in an Agency foreign language training course at an average or better-than-average level. For example, 22 per cent of the women who obtain an aptitude rating of "8" can be expected to be average or better in course performance, while 5 per cent of the men with ratings of "8" can be expected to be average or better in course performance. A man needs an aptitude rating of "6" to have about the same expectation of success in language training as a woman with a rating of "8". At the other end of the scale, 90 per cent of either men or women who obtain aptitude ratings of "2" can be expected to do average or better-than-average work in training. The differences in relationship are due to differences between men and women in both training performance and test scores. On the average women are somewhat higher on both.

Percent of Women Whose Language Training Performance Is Expected to Be Average or Better than Average (100 80 60 40 20 0)	Aptitude Category	Percent of Men Whose Language Training Performance Is Expected to Be Average or Better than Average (0 20 40 60 80 100)
88%	1.	91%
80%	2.	85%
72%	3.	68%
63%	4.	52%
53%	5. x	37%
[illegible]	6.	23%
[illegible]	7.	13%
[illegible]	8.	5%

Since many things other than aptitudes enter into the determination of training course performance, in any class of students there will usually be some whose performance will be better than would be expected from their test scores, just as there will likely be some whose performance is poorer than expected. STRENGTH OF MOTIVATION, PRIOR EXPERIENCE WITH A FOREIGN LANGUAGE, and other factors should be considered in selecting people for language training and in interpreting language training results. For example, the number of languages previously studied or learned and the amount of academic and non-academic language-learning experience are factors not measured by the tests but are indicative of probable success in learning a foreign language. Whether such experience was in the same language as the one to be studied or in a different one is, of course, an additional relevant factor.

___1___ foreign languages have been studied or learned by this individual.

Months of Academic Training			Non-academic Experience (1 year or more)	
High School	College	Other	Reading or Writing	Speaking
18	54	22	no	no

This report may be shown to the individual concerned.

/s/ EDWARD A. RYNQUIST

EDWARD A. RYNQUIST

C-O-N-F-I-D-E-N-T-I-A-L

S E C R E T

TRAINING REPORT

RECORDS OFFICERS COURSE 30 April - 4 May 1962

Student : Charlotte Z. Bustos-Videla Office : WH/3

Year of Birth: 1929 Service Designation: D

Grade : GS-12 Number of Students : 34

EOD Date : Aug 1951

COURSE OBJECTIVES - CONTENT AND METHODS

This course, designed for present and prospective Records Officers, has four principal objectives.

1. To give an appreciation for the Agency's CS mission.

2. To describe the role that records play in the discharge by the Agency of the responsibilities inherent in the mission.

3. To emphasize the importance of records and proper records management in the successful performance of the stated mission.

4. To increase awareness of the inter-relationships between the CS mission and records; to sharpen judgement in the handling and disposition of records; and to improve performance of Records Officers.

The student is instructed through the media of lectures, directed reading, practical exercises and discussions.

ACHIEVEMENT RECORD

This is a certificate of attendance only; no attempt was made to evaluate student achievement in the course.

FOR THE DIRECTOR OF TRAINING:

/s/ Augustus F. Schermerhorn 24 July 1962
Chief Instructor Date

S E C R E T

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER: 007667

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Bustos-Videla, Charlotte	12 Jan 29	F	GS-12	D

6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION
OPS OFFICER	DDP WH 3	

9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT	
CAREER / RESERVE / TEMPORARY		INITIAL	REASSIGNMENT SUPERVISOR
CAREER-PROVISIONAL (See instructions - Section C)	X	ANNUAL	REASSIGNMENT EMPLOYEE
SPECIAL (Specify):		SPECIAL (Specify):	

11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From- to-)
31 January 1963	1 Jan - 30 Dec 62

SECTION B — PERFORMANCE EVALUATION

- **W - Weak**: Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.
- **A - Adequate**: Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.
- **P - Proficient**: Performance is more than satisfactory. Desired results are being produced in a proficient manner.
- **S - Strong**: Performance is characterized by exceptional proficiency.
- **O - Outstanding**: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

Specific Duty	Rating Letter
SPECIFIC DUTY NO. 1: Supervises office staff of Mexico Desk in preparing correspondence, keeping files, carding, and training new personnel.	O
SPECIFIC DUTY NO. 2: Desk intelligence officer for important satellite and FI operations in Mexico, processing projects, handling operational correspondence, conducting liaison with other divisions.	S
SPECIFIC DUTY NO. 3: Routing cables, dispatches for the entire Desk, supervising distribution of work.	O
SPECIFIC DUTY NO. 4: Personally handling large number of clearances, project approvals, cable coordinations, and official negotiations on matters touching all aspects of the Desk's work.	O
SPECIFIC DUTY NO. 5: Preparation of budget, special papers, surveys, and briefings.	O
SPECIFIC DUTY NO. 6:	

OVERALL PERFORMANCE IN CURRENT POSITION

	Rating Letter
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	O

28 FEB 1963

FORM 45 OBSOLETE PREVIOUS EDITIONS.

SECRET

SECRET
(When Filled In)

SECTION C — **NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

This officer is the person chiefly responsible for the Mexico Desk's deserved reputation for excellence and efficiency. The complicated and never-ending tasks of project processing, clearances, tracing, and coordination are handled by her with blinding speed and unerring perfection. Procedural problems are there to be solved, and the solutions come with amazing rapidity. Operational problems are worked out thoroughly and conscientiously. No corners are cut and no principles are compromised.

Never at a loss for an answer, this officer never shrinks from any assignment and instinctively wants to take over any vexing problem which is holding up progress. She is complete mistress of file and record resources and answers all queries within minutes. The most complex budgetary and planning projects are handled by her with deceptive ease.

These qualities of rare efficiency and speed are coupled with an even rarer degree of amiability and cooperativeness. The work which proceeds under her at such a break-neck pace nonetheless goes on in an air of placidity and good humor. The large office staff is run without a trace of tension, jealousy, or friction. All of this is traceable to this officer's fine example and catalytic effect on her colleagues.

Finely-educated, handling the Spanish language with fluency, and keeping up with current events in her area, this officer is a unique asset to our organization.

SECTION D — **CERTIFICATION AND COMMENTS**

1. **BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
26 February 1963	[signature]

2. **BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
26 February 1963	C/WH/3/MEXICO	John. M. Whitten [signature]

3. **BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
26 February 1963	AC/WH/3	[signature] Forrest Shivers

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT

FILE 1962

EMPLOYEE SERIAL NUMBER: CSFD 0076[illegible]7

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE
BUSTOS-VIDELA Charlotte Z	12 January 1929	Female	12

5. SERVICE DESIGNATION	6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT
D	Operations Officer	DDP/WH/3/D. C.

8. CAREER STAFF STATUS					
	NOT ELIGIBLE		MEMBER		DEFERRED
	PENDING		DECLINED		DENIED

9. TYPE OF REPORT			
	INITIAL	X	REASSIGNMENT/SUPERVISOR
X	ANNUAL		REASSIGNMENT/EMPLOYEE

10. DATE REPORT DUE IN O.P.	11. REPORTING PERIOD (From – To)	SPECIAL (Specify)
31 January 1962	1 Jan 61 - 31 Dec 61	

SECTION B — EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise *(indicate number of employees supervised).*

1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding

SPECIFIC DUTY	RATING NO.	SPECIFIC DUTY	RATING NO.
SPECIFIC DUTY NO. 1 Responsible for Project renewals and other correspondence and action on 12 support type projects for Mexico City and Monterrey	7	SPECIFIC DUTY NO. 4 Assist the Chief of the desk in administration of office to assure the smooth functioning of the desk. Includes distribution of work,	6
SPECIFIC DUTY NO. 2 Handle miscellaneous admin and support matters (requests for tech equip, studies, training guides, etc) for Mexico and Monterrey	7	SPECIFIC DUTY NO. 5 XXXXXXXXXXX routing of pouches and cables, supervision of clerical staff of 4.	
SPECIFIC DUTY NO. 3 Supervise maintenance of records at the desk and represent Desk as Records Officer in discussions with [illegible] on Hqs and field records problems	6	SPECIFIC DUTY NO. 6	

SECTION C — EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance clearly meets basic requirements.
4 - Performance clearly exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding.

RATING NO.: 6

SECTION D — DESCRIPTION OF THE EMPLOYEE

In the rating boxes below, check (X) the degree to which each characteristic applies to the employee

1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree

CHARACTERISTICS	NOT APPLICABLE	NOT OBSERVED	1	2	3	4	5
GETS THINGS DONE							X
RESOURCEFUL							X
ACCEPTS RESPONSIBILITIES							X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							X
DOES HIS JOB WITHOUT STRONG SUPPORT							
FACILITATES SMOOTH OPERATION OF HIS OFFICE							X
WRITES EFFECTIVELY						X	
SECURITY CONSCIOUS							
THINKS CLEARLY							
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							X
OTHER (Specify):							

SEE SECTION "E" ON REVERSE SIDE

FORM 8-58 45 OBSOLETE PREVIOUS EDITIONS.

SECRET

(4)

SECRET
(When Filled In)

SECTION E — NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

FEB 12 11 43 AM '62

This outstanding employee has maintained the high standard of performance set forth in the report of this supervisor '[illegible]o. Where possible, she has exceeded her earlier performance record. During the past year this office acquired considerable new personnel, which Subject trained in a highly capable manner to guarantee the smooth-functioning of the office. The undersigned hopes this employee will continue to serve this organization indefinitely notwithstanding her marriage during the past year.

SECTION F — CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE	SIGNATURE OF EMPLOYEE
23 January 1962	[signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
24	

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

- EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS
- REPORT MADE WITHIN LAST 90 DAYS
- OTHER (Specify):

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
23 January 1962	Chief of Desk	John G. Hoyn — John G. Hoyn

3. ✓ BY REVIEWING OFFICIAL

- ✓ I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
- I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
- I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
- I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
6 Feb 1962	C WH/7	[signature]

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT

13 JAN 1961

EMPLOYEE SERIAL NUMBER

SECTION A GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE
Zehrung Charlotte	12 Jan. 1929	Female	GS-12

5. SERVICE DESIGNATION	6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT
DI	Ops Officer	DDP/WH/3/Mexi/DC

8. CAREER STAFF STATUS

	NOT ELIGIBLE	X	MEMBER		DEFERRED
	PENDING		DECLINED		DENIED

9. TYPE OF REPORT

	INITIAL		REASSIGNMENT/SUPERVISOR
X	ANNUAL		REASSIGNMENT/EMPLOYEE

SPECIAL (Specify)

10. DATE REPORT DUE IN O.P.: 31 January 1961

11. REPORTING PERIOD From To: 30 Sep 59 - 31 Dec 60

SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

1 - Unsatisfactory | 2 - Barely adequate | 3 - Acceptable | 4 - Competent | 5 - Excellent | 6 - Superior | 7 - Outstanding

SPECIFIC DUTY	RATING NO.	SPECIFIC DUTY	RATING NO.
SPECIFIC DUTY NO. 1 Responsible for Project renewals and other correspondence and action on 12 supporttype projects for Mexico City and Monterrey	7	SPECIFIC DUTY NO. 4 Assist the Chief of the Desk in administration of office to assure the smooth functioning of the desk. Includes distribution of work, routing xxxxxxxxxxxxx of pouches and cables, supervision of clerical staff of 4.	6
SPECIFIC DUTY NO. 2 Handle miscellaneous admin and support matters (requests for tech equip, studies, training guides, etc) for Mexico and Monterrey	7	SPECIFIC DUTY NO. 5	
SPECIFIC DUTY NO. 3 Supervise maintenance of records at the desk and represent Desk as Records Officer in discussions with RID on Hqs and field records problems.	6	SPECIFIC DUTY NO. 6	

SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance clearly meets basic requirements.
4 - Performance clearly exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding.

RATING NO.: 6

SECTION D DESCRIPTION OF THE EMPLOYEE

In the rating boxes below, check (X) the degree to which each characteristic applies to the employee

1 - Least possible degree | 2 - Limited degree | 3 - Normal degree | 4 - Above average degree | 5 - Outstanding degree

CHARACTERISTICS	NOT APPLICABLE	NOT OBSERVED	1	2	3	4	5
GETS THINGS DONE							X
RESOURCEFUL							X
ACCEPTS RESPONSIBILITIES							X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							X
DOES HIS JOB WITHOUT STRONG SUPPORT							
FACILITATES SMOOTH OPERATION OF HIS OFFICE							
WRITES EFFECTIVELY						X	
SECURITY CONSCIOUS							X
THINKS CLEARLY							X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							X
OTHER (Specify):							

SEE SECTION "E" ON REVERSE SIDE

FORM 8-58 45 OBSOLETE PREVIOUS EDITIONS. SECRET (43)

14-00000

SECRET
(When Filled In)

OFFICE OF PERSONNEL

SECTION E — **NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to provide for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

MAIL ROOM

This is a truly outstanding employee with capabilities far beyond those required for her present position. She has an unusually keen mind, makes decisions that are correct without hesitation and carries out all actions promptly and efficiently. She is the supervisor of the office staff, who respect and admire her ability. In addition to her skill, she is possessed of a most pleasing disposition which ingratiates her with the other members of the staff. The years of experience she has had at the various jobs to be done at a country desk make her invaluable as a trainer and supervisor for new personnel. Her knowledge of Spanish has also been especially helpful at the Mexican Desk. This supervisor would be most pleased to have her serve with him on any future assignment.

SECTION F — **CERTIFICATION AND COMMENTS**

1. **BY EMPLOYEE**

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE	SIGNATURE OF EMPLOYEE
31 December 1960	[signature]

2. **BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
12	

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

- EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS
- REPORT MADE WITHIN LAST 90 DAYS
- OTHER (Specify):

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
31 December 1960	Desk Chief, WH/3/Mexico	John G. Heyn [signature]

3. **BY REVIEWING OFFICIAL**

- [✓] I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
- [ ] I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
- [ ] I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
- [ ] I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
5 Jan 1961	Chief WH/3	[signature]

SECRET

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE
ZEHRUNG, Charlotte	12 Jan. 1929	Female	GS-11

5. SERVICE DESIGNATION	6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT
DI	I.O. (FI)	DDP/WH/III/Maxi/DC

8. CAREER STAFF STATUS

	NOT ELIGIBLE	X	MEMBER		DEFERRED
	PENDING		DECLINED		DENIED

9. TYPE OF REPORT

	INITIAL		REASSIGNMENT/SUPERVISOR
X	ANNUAL		REASSIGNMENT/EMPLOYEE
	SPECIAL (Specify)		

10. DATE REPORT DUE IN O.P.	11. REPORTING PERIOD From	To
31 October 1959	31 May 59	30 Sep 59

SECTION B — EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding

SPECIFIC DUTY	RATING NO.
SPECIFIC DUTY NO. 1: Responsible Case Officer for several FI and CE/CI Projects	5/6
SPECIFIC DUTY NO. 2: Handles large volume of correspondence with Station in support of Operations	6/7
SPECIFIC DUTY NO. 3: Supervises maintenance of desk records and project files	6/7
SPECIFIC DUTY NO. 4: Consults and coordinates with various Hqs components re [illegible] Station's Projects and [illegible]	6
SPECIFIC DUTY NO. 5: Prepares, reviews and coordinates memoranda	6
SPECIFIC DUTY NO. 6:	

SECTION C — EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance clearly meets basic requirements.
4 - Performance clearly exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding.

RATING NO.: 5/6

SECTION D — DESCRIPTION OF THE EMPLOYEE

In the rating boxes below, check (X) the degree to which each characteristic applies to the employee

1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree

CHARACTERISTICS	NOT APPLICABLE	NOT OBSERVED	1	2	3	4	5
GETS THINGS DONE							X
RESOURCEFUL						X	
ACCEPTS RESPONSIBILITIES							X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							
DOES HIS JOB WITHOUT STRONG SUPPORT							
FACILITATES SMOOTH OPERATION OF HIS OFFICE						X	
WRITES EFFECTIVELY						X	
SECURITY CONSCIOUS						X	
THINKS CLEARLY							
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							
OTHER (Specify)							

SEE SECTION "E" ON REVERSE SIDE

FORM 8-56 45 OBSOLETE PREVIOUS EDITIONS. SECRET

SECRET

SECTION E — NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

OFFICE OF PERSONNEL
2 40 PM '59
MAIL ROOM

Please see previous fitness report. This employee was rated four months ago. There is no change in the rating; she has continued to give an outstanding performance.

SECTION F — CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE: 2 Oct 59

SIGNATURE OF EMPLOYEE: [signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 26 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS | REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE: 1 Oct 1959

OFFICIAL TITLE OF SUPERVISOR: C/WH/III/Mexico

TYPED OR PRINTED NAME AND SIGNATURE: [signature] John B. Brady

3. BY REVIEWING OFFICIAL

✓ I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL:

DATE:

OFFICIAL TITLE OF REVIEWING OFFICIAL: C/WH/III

TYPED OR PRINTED NAME AND SIGNATURE: [signature] Robert B. Dahlgren

SECRET

SECRET
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER

SECTION A — GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE
ZEHRUNG, Charlotte L.	12 Jan 1929	F	11

5. SERVICE DESIGNATION	6. OFFICIAL POSITION TITLE	7. OFF/DIV/BR OF ASSIGNMENT
DI	I.O. (FI)	DDP/WH/III/Mexico/DC

8. CAREER STAFF STATUS					
NOT ELIGIBLE	X	MEMBER		DEFERRED	
PENDING		DECLINED		DENIED	

9. TYPE OF REPORT			
	INITIAL		REASSIGNMENT/SUPERVISOR
X	ANNUAL		REASSIGNMENT/EMPLOYEE

10. DATE REPORT DUE IN O.P.	11. REPORTING PERIOD From / To	SPECIAL (Specify)
28 August 1958	28 August 1957 - 31 May 59	

SECTION B — EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise *(indicate number of employees supervised)*.

1 - Unsatisfactory | 2 - Barely adequate | 3 - Acceptable | 4 - Competent | 5 - Excellent | 6 - Superior | 7 - Outstanding

SPECIFIC DUTY	RATING NO.	SPECIFIC DUTY	RATING NO.
NO. 1: Responsible Case Officer for several FI and CE/CI Projects	5/6	NO. 4: Consults and coordinates with various Hqs components regarding Station's Projects and Operations	6
NO. 2: Handles large volume of correspondence with Station in support of Operations	6/7	NO. 5: Prepares, reviews and coordinates memoranda	6
NO. 3: Supervises maintenance of desk records and project files	6/7	NO. 6:	

SECTION C — EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

1 - Performance in many important respects fails to meet requirements.
2 - Performance meets most requirements but is deficient in one or more important respects.
3 - Performance clearly meets basic requirements.
4 - Performance clearly exceeds basic requirements.
5 - Performance in every important respect is superior.
6 - Performance in every respect is outstanding.

RATING NO.: 5/6

SECTION D — DESCRIPTION OF THE EMPLOYEE

In the rating boxes below, check (X) the degree to which each characteristic applies to the employee

1 - Least possible degree | 2 - Limited degree | 3 - Normal degree | 4 - Above average degree | 5 - Outstanding degree

CHARACTERISTICS	NOT APPLICABLE	NOT OBSERVED	1	2	3	4	5
GETS THINGS DONE							X
RESOURCEFUL						X	
ACCEPTS RESPONSIBILITIES							X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							X
DOES HIS JOB WITHOUT STRONG SUPPORT							X
FACILITATES SMOOTH OPERATION OF HIS OFFICE						X	
WRITES EFFECTIVELY						X	
SECURITY CONSCIOUS						X	
THINKS CLEARLY							X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							X
OTHER (Specify):							

SEE SECTION "E" ON REVERSE SIDE

14-00000

SECRET
(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

JUL 21 2 51 PM '59

This employee is intelligent, loyal and dedicated to duty. She has an outstanding ability in getting her job assignments accomplished effectively and with a minimum of time and support. She readily accepts responsibility, is a highly efficient worker who thinks clearly and logically. Her knowledge of Headquarters and Field procedures plus her ability to organize her work greatly facilitates the smooth functioning of the Mexican Desk. She has demonstrated a superior comprehension of the numerous and varied projects of the Mexico City Station which has contributed to the overall Headquarters support of the Station's operations. Because of her sound understanding of operations and her outstanding capacity for work, Miss Zehrung has an excellent potential for assuming greater responsibilities. Additional training is dependent upon her future assignments.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE	SIGNATURE OF EMPLOYEE
[illegible] '59	[signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
22 months	

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS
OTHER (Specify):	

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
11 June 1959	C/WH/III/Mexico	John B. Brady [signature]

3. BY REVIEWING OFFICIAL

X	I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
	I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
	I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
	I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
14 July 1959	C/WH/III	[signature] R.H. Dahlgren

SECRET

14-00000

SECRET
(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section "A" below.

SECTION A. GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
ZEHRUNG, Charlotte L.	12 Jan 1929	F	DI

5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE
DDP/WH/II/DC/Argentina/MEXICO	Reports Officer

7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)
GS-11	4 Nov 1957	28 August 1956 - 27 August 1957

10. TYPE OF REPORT (Check one): [ ] INITIAL; [X] ANNUAL; [ ] REASSIGNMENT-SUPERVISOR; [ ] REASSIGNMENT-EMPLOYEE; [ ] SPECIAL (Specify)

SECTION B. CERTIFICATION

1. FOR THE RATER: THIS REPORT [X] HAS [ ] HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:

A. CHECK (X) APPROPRIATE STATEMENTS:

	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.		IF INDIVIDUAL WAS RATED "1" IN C1 OR D, A WARNING LETTER WAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
X	THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.		I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.		

B. THIS DATE	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	D. SUPERVISOR'S OFFICIAL TITLE
20 January 1958	John B. Brady *John B. Brady*	C/WH/III/Mexico

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT:

BY DATE
Posted Pos. Cont. ... [illegible] 21 JAN 1958
JAN 30 1958

[ ] CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
21 January 1958	R. N. Dahlgren	C/WH/III

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

INSERT RATING NUMBER: 6

1 - DOES NOT PERFORM DUTIES ADEQUATELY, HE IS INCOMPETENT.
2 - BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
5 - A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

14-00000

SECRET
(When Filled In)

C. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

OFFICE ... JAN 24 2 09 PM '58 ... MAIL ROOM

DIRECTIONS
a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
b. Rate performance on each specific duty considering ONLY effectiveness in performance of that specific duty.
c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
d. Compare in your mind, when possible, the individual being rated with others doing the same duty at a similar level of responsibility.
e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
f. Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA

g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

DESCRIPTIVE RATING NUMBER
1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY
2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY
3 - PERFORMS THIS DUTY ACCEPTABLY
4 - PERFORMS THIS DUTY IN A COMPETENT MANNER
5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB
6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS
7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY

SPECIFIC DUTY	RATING NUMBER	SPECIFIC DUTY	RATING NUMBER
NO. 1: Supervises maintenance of desk records and project files.	7	NO. 4: Extracts pertinent information from reports and statistics for the preparation of studies	6
NO. 2: Reviews and coordinates memoranda	6	NO. 5: Prepares cables and dispatches for the field	6
NO. 3: Processes for dissemination reports from field stations	5	NO. 6: Supervises maintenance of country desk files	6

C. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

This employee is a highly efficient worker who in accomplishing her job assignments has performed in a very outstanding manner. She has the ability to think clearly and logically and at all times exercises extreme good judgment. Her knowledge of Hqs and field procedures constitutes a great asset and she has the facility for picking up loose ends and keeping an office smoothly running. She is willing to undertake any assignment that facilitates getting the job done and is entirely capable of seeing that the job is properly done. Her contribution to the job reflects conscientiousness, loyalty and devotion to duty far above the average.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual....productivity, conduct on the job, pertinent personal characteristics or habits, special defects or talents....and how he fits in with your team. Compare him with others doing similar work of about the same level.

RATING NUMBER: 6

1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
2 - OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? [ ] YES [X] NO IF YES, EXPLAIN FULLY

SECRET

SECRET
(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OP no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E. GENERAL

1. NAME (Last) (First) (Middle): ZEHRUNG, Charlotte
2. DATE OF BIRTH: 12 Jan 1929
3. SEX: F
4. SERVICE DESIGNATION: DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT: DDP/WH/II/DC/Argentina/MEXICO
6. OFFICIAL POSITION TITLE: Reports Officer
7. GRADE: GS-11
8. DATE REPORT DUE IN OP: 4 Nov 1957
9. PERIOD COVERED BY THIS REPORT (Inclusive dates): 28 August 1956 - 27 August 1957
10. TYPE OF REPORT (Check one): [ ] INITIAL [X] ANNUAL [ ] REASSIGNMENT-SUPERVISOR [ ] REASSIGNMENT-EMPLOYEE [ ] SPECIAL (Specify)

SECTION F. CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED

A. THIS DATE: 20 January 1958
B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR: John B. Brady
C. SUPERVISOR'S OFFICIAL TITLE: C/WH/III/Mexico

2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.

A. THIS DATE: 21 January 1958
B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL: R. N. Dahlgren
C. OFFICIAL TITLE OF REVIEWING OFFICIAL: C/WH/III

SECTION G. ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

RATING NUMBER: 6

1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
3 - MAKING PROGRESS BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? [ ] Yes [ ] No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER

0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION
1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION
2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION
3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION

ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHERE CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)
3		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)
	2	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	3	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
	2	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		OTHER (Specify)

FORM NO. 45 (Part II) REPLACES PREVIOUS EDITIONS OF FORMS 45 AND 45a WHICH ARE OBSOLETE. 1 NOV 55

SECRET

Potential (4)

SECRET
(When Filled In)

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION

7 months

JAN 24 2 09 PM '58

4. COMMENTS CONCERNING POTENTIAL

Her potential has a wide range. She has the ability to organize and direct a sizeable office of reports writers and to supervise the administrative operations for a large office. She has a distinct aptitude for operations and her potential in the field of operational support work as well as in the direct handling of operations is a good one.

SECTION H. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

None recommended at this time.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

CATEGORY NUMBER
- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
5	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
5	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	3	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	5	24. WORKS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGEMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	5	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
5	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

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(When filled in)

NOTE TO PCS RETURNEES

Personnel processing in from a PCS foreign field assignment through Central Processing Branch are required to review the Employee Conduct Handbook and the information for PCS returnees. This information is contained in a notebook provided by the CPB receptionist.

M E M O R A N D U M   O F   U N D E R S T A N D I N G

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 9 July 1970 and the information for returnees dated 1 February 1972.

CHARLOTTE B. BUSTOS-VIDELA
NAME
(Please Print)

Charlotte J. Bustos-Videla — Signature

5 September 1972 — Date

14-00000

1

SECRET
(When Filled In)

FILE
PUNCHED
BY

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME LAST (Print) 7-24	FIRST	MIDDLE
007667	Bustosvidela	Charlotte	Z

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 38, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S MONTH 25-26	DAY 27-28	YEAR 29-30	DEPARTURE O/S MONTH 31-32	DAY 33-34	YEAR 35-36	TYPE OF DATA: 1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	CODE 37	O/P USE ONLY 38	39	COUNTRY	CODE 40-42
			08	10	72		1			Mexico	450

TDY DATES OF SERVICE

ARRIVAL O/S MONTH 25-26	DAY 27-28	YEAR 29-30	DEPARTURE O/S MONTH 31-32	DAY 33-34	YEAR 35-36	TYPE OF DATA: 2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	CODE 37	O/P USE ONLY 38	39	AREA(S)	CODE 40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

	TRAVEL VOUCHER		DISPATCH
✓	CABLE		DUTY STATUS OR TIME AND ATTENDANCE REPORT
	OTHER (Specify)		

DOCUMENT IDENTIFICATION NO. IN 680799

DOCUMENT DATE/PERIOD 8/10/72

REMARKS

PREPARED BY
- CCO
- C O L DIVISION, CTRS.
- ✓ C S Y DIVISION

✓ REPORT ANNOTATED ON CONTROL DOCUMENT

DATE 8/11/72

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

SIGNATURE [signature]

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

FORM 4-71 1451a OBSOLETE PREVIOUS EDITIONS

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(4-10)

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SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item S-1)	NAME OF SUPERVISOR (true)	DATE (from item S-2)
Charlotte Z. Bustos-Videla	8 Sep 1971	John R. Horton	8 Sep 1971

DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:
15 September 1971	HMMT 11,086, 8 Sep 1971	

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
12 Jan 29		Cuba/CI; GS-13	Mexico City	Nominal LNGOLD

6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE
28 July 1967	9 Sept. 1972	------	16 October (3 weeks H/L) (2 weeks A/L)

7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

None

8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

My husband is currently a professor in New York City, and I would very much appreciate an assignment in New York City so I may join him there. I would xbe agreeable to changing somewhat my departure date from Mexico if it would help in my accepting an opening in New York City. (My reason for requesting the two month extension is to insure my 5 years overseas duty so as to qualify for the organization's retirement plan.)

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-8)

1. Analysis of personality and target data from raw and finished reports, preparation of target studies, and finished intelligence dissems.

2. Operational reporting: cables, dispatches, projects, progress reports, etc.

3. Handling of outside transcribers. (off and on).

4. Records control and purge of Station files.

5. Preparation of memos for other components of LNCUFF.

6. General Ops support IA typo work.

10. TRAINING DESIRED:
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS

FORM 5-63 202 OBSOLETE PREVIOUS EDITIONS

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SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT.

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (*for 1st, 2nd, and 3rd choice*) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

[X] EXTEND TOUR 2 MONTHS AT CURRENT STATION TO 9 September (DATE).

2 [X] BE ASSIGNED TO HQS FOR A TOUR OF DUTY: INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE. 1ST CHOICE DOD 2ND CHOICE EUR 3RD CHOICE WHD

1 [X] BE ASSIGNED TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION 1ST CHOICE New York 2ND CHOICE ______ 3RD CHOICE ______

3 [ ] RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

Those of you who know her realize that I would hardly give up SCALETTI, even after five years on the job, without a fight, did not other reasons intervene. Her husband is working in New York now and so her remaining here any longer than needed for her to qualify for her retirement time, as she explains, is a needless hardship. (It would help us if you would confirm that time: is that the date needed for her to remain in order to qualify?) Please do your best to arrange

—continued

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Subject will be assigned as chief of the CA Section, WH/Branch One. She is being notified via HMMS 7580.

DATE 9Jun72 TITLE DC/WH/Pers SIGNATURE Jane Wurz

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. ______ DATED: ______

CABLE NO. ______ DATED: ______

CAREER SERVICE REPRESENTATIVE: ______ (SIGNATURE) DATE: ______

SECRET

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12. CONTINUED

an assignment in New York for her. She is such a valuable person that anyone who has worked with her would be glad to have her on the premises: so there is no need to try to "sell" her: it's just the question of whether the timing would be right, I should think.

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Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER
BUSTOS-VIDELA	Charlotte	Z	069-24-3138

1. RESIDENCE DATA

PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY: Washington, D.C.	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad): Washington, D.C.
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE: Dayton, Ohio	HOME LEAVE RESIDENCE: Dayton, Ohio

2. MARITAL STATUS (Check one)

SINGLE	X MARRIED	SEPARATED	DIVORCED	WIDOWED	ANNULLED

IF MARRIED, PLACE OF MARRIAGE: Dayton, Ohio	DATE OF MARRIAGE: March 18, 1961
IF DIVORCED, PLACE OF DIVORCE DECREE: NA	DATE OF DECREE: NA
IF WIDOWED, PLACE SPOUSE DIED: NA	DATE SPOUSE DIED

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)

NA

3. MEMBERS OF FAMILY

NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.
Cesar Bustos-Videla	Apartado Postal 6-940, Mexico 6, D.F.	MEXICO CITY MEXICO 525-42-36

NAMES OF CHILDREN	ADDRESS	SEX	DATE OF BIRTH
NA			

NAME OF YOUR FATHER (Or male guardian)	ADDRESS	TELEPHONE NO.
Samuel D. Zehrung	425 Dayton Towers Dr, Dayton, Ohio	513-222-2550
NAME OF YOUR MOTHER (Or female guardian)	**ADDRESS**	**TELEPHONE NO.**
Hazel Zehrung	Same	Same

WHAT MEMBER(S) OF YOUR FAMILY, IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.

CENTRAL PROCESSING BRANCH

JUN 22 11 00 AM '78

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., Miss) (Last-First-Middle): Cesar Bustos-Videla	RELATIONSHIP: husband
HOME ADDRESS (No., Street, City, State, Zip Code): see above	HOME TELEPHONE NUMBER: see above
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE: Universidad de las Americas, Puebla, MEXICO	BUSINESS TELEPHONE & EXTENSION

	YES	NO
IS THE INDIVIDUAL NAMED ABOVE WITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.) yes	X	
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)	X	
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 6.)	X	

The persons named in item 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

CONTINUED ON REVERSE SIDE

CURRENT RESIDENCE AND DEPENDENCY REPORT

FORM 61 USE PREVIOUS EDITIONS. 5-67

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(4)

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(When Filled In)

5. VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

All financial information is on file with our lawyer

Mr. John DAHLGREN
DAHLGREN DARRAGH & CLOSE
1000 Conn. Ave., N.W., Washington D.C.

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? ☐ YES ☒ NO

IF YES, DO YOU HAVE A JOINT ACCOUNT? ☐ YES ☐ NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? ☒ YES ☐ NO. (If "Yes" where is document located?)

On file with lawyer listed above

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? ☐ YES ☐ NO. (If "Yes" give name(s) and address)

NA

HAVE YOU EXECUTED A POWER OF ATTORNEY? ☐ YES ☐ NO. (If "Yes", who possess the power of attorney?)

Believe the lawyer has this also

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT	DATE	SIGNATURE
[illegible]	22 June 1970	[illegible signature]

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MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 7 October 1963, and the information brochure for PCS returnees, dated May 1964.

[signature] 22 June 1970

Signature Date

BUSTOS Videla, Charlotte

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(When Filled In)

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item S-1)	NAME OF SUPERVISOR (true)	DATE (from item S-2)
Charlotte Bustos-Videla	26 Jan. 70	James B. Noland	26 Jan. 19 0

DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:
2 Feb. 1970	HMMT-10102	10 APR 1970

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
12 Jan 29		Exec Assistant, GS-13	MEXICO CITY Station	Tourist

6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE
28 July 1967	16 Aug 1970	Will not go Hdqs unless requested	26 Oct 1970

7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

none

8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

Subject wishes to remain overseas for a minimum of two more years to complete her 5 years overseas requirement.

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form).
(also attach personal cover questionnaire in accordance with CSI-F 240-8)

1. During most of Subject's tour in Mexico she has been the Cuban IA. In this job she also handled some Cuban operational matters including two outside contract employees.

2. During this period she also handled some sensitive projects for the COS.

3. During the last six months Subject has been Exec Asst to the COS/DCOS concentrating on file and administrative reorganization of the Station.

4. Subject has had supervisory responsibility over one to three clerical/TDY staff for short periods.

10. TRAINING DESIRED:
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS

None

FORM 202 OBSOLETE PREVIOUS EDITIONS

SECRET

(4)

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11a. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

I enjoy both Administrative and Ops/IA work.

11b. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (*for 1st, 2nd, and 3rd choice*) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

3 ☐ EXTEND TOUR: 12 MONTHS AT CURRENT STATION TO Aug 1971 (DATE)

☐ BE ASSIGNED TO HDQTRS FOR A TOUR OF DUTY: INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE. 1ST CHOICE ____ 2ND CHOICE ____ 3RD CHOICE ____

1 ☐ BE ASSIGNED TO ANOTHER FIELD STATION: INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION 1ST CHOICE Paris 2ND CHOICE ____ 3RD CHOICE ____

2 ☐ RETURN TO MY CURRENT STATION for 2nd tour.

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

Would not stand in Subject's way, were she to be fortunate enough to get a Paris assignment. However with her long Mexico background (both Hdqs and field) and her multiple talents she has been invaluable in the reorganization of this highly complicated Station under changed circumstances, will continue to be so during the next several years and to lose her would be like losing one's right arm. Therefore we strongly endorse either a second tour or an extension.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

WH Division recommends that subject return to Mexico City for a second tour.

DATE 11 Mar 70 TITLE C/WH/Pers SIGNATURE Henry L. Berthold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

New tour in Mexico City

15. EMPLOYEE NOTIFIED BY DISPATCH NO. [illegible] DATED: [illegible]

CABLE NO. ____ DATED: ____

CAREER SERVICE REPRESENTATIVE: ____ DATE: ____
(SIGNATURE)

SECRET

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(When Filled In)

Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER
BUSTOS-VIDELA	[illegible]	Z	649-24-5138

1. RESIDENCE DATA

PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY: WASHINGTON DC.	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad): N.A
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE: WASHINGTON DC.	HOME LEAVE RESIDENCE: ~~CLEVELAND~~ DAYTON, OHIO — Director OVIC approved by D/Pers on 4 June 7[illegible]

2. MARITAL STATUS (Check one)

SINGLE	MARRIED	SEPARATED	DIVORCED	WIDOWED	ANNULLED
	X				

IF MARRIED, PLACE OF MARRIAGE: DAYTON, OHIO	DATE OF MARRIAGE: March 18, 1961
IF DIVORCED, PLACE OF DIVORCE DECREE: NA	DATE OF DECREE
IF WIDOWED, PLACE SPOUSE DIED: NA	DATE SPOUSE DIED

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)

NA.

3. MEMBERS OF FAMILY

NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.
CESAR BUSTOS-VIDELA	Business: LAS AMERICAS UNIV., MEXICO CITY, MEXICO	

NAMES OF CHILDREN	ADDRESS	SEX	DATE OF BIRTH
—			

NAME OF YOUR FATHER (Or male guardian): SAMUEL D. ZEHRUNG	ADDRESS: [illegible] DAYTON, OHIO	TELEPHONE NO.: ?
NAME OF YOUR MOTHER (Or female guardian): HAZEL J. ZEHRUNG	ADDRESS: SAME	TELEPHONE NO.: ?

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.
am telling all my family I am resigning 15 July 67.

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., Miss) (Last-First-Middle): MRS. PFLAUMER, Mary Elizabeth (Mrs. Dale)	RELATIONSHIP: SISTER
HOME ADDRESS (No., Street, City, State, Zip Code): 576 LAKE FOREST DRIVE, BAY VILLAGE, OHIO 44140	HOME TELEPHONE NUMBER: 216-871-0689
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE: —	BUSINESS TELEPHONE & EXTENSION

IS THE INDIVIDUAL NAMED ABOVE WITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.) only witting I used to work for govt.	YES	
	NO	X
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.) lawyer is executor [illegible] Mrs. Dale Pflaumer may make personal decisions.	YES	X
	NO	
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 6.)	YES	X
	NO	

The persons named in item 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

CONTINUED ON REVERSE SIDE

CURRENT RESIDENCE AND DEPENDENCY REPORT

CONFIDENTIAL
(When Filled In)

8. VOLUNTARY ENTRIES
Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.
INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED. The National Bank of Washington, Dupont Circle Branch, Washington D.C. joint account with husband Columbia Federal Savings & Loan Assoc. 5301 Wisc Ave. N.W. D.C. joint account with husband.
ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? ☐ YES ☒ NO IF YES, DO YOU HAVE A JOINT ACCOUNT? ☐ YES ☐ NO
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? ☒ YES ☐ NO. (If "Yes" where is document located?) Lawyer: Mr John O Dahlgren Dahlgren, Darragh & Close 1000 Conn ave, NW
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? ☐ YES ☒ NO. (If "Yes" give name(s) and address)
HAVE YOU EXECUTED A POWER OF ATTORNEY? ☒ YES ☐ NO. (If "Yes", who possess the power of attorney?) for accepting checks: The National Bank of Washington

9. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT	DATE	SIGNATURE
	June 28 1967	[illegible]

CONFIDENTIAL

14-00000

SECRET

	ELECTION, DECLINATION, OR WAIVER OF LIFE INSURANCE COVERAGE FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM	IMPORTANT AGENCY INSTRUCTIONS ON BACK OF ORIGINAL

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last) (first) (middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
Bustos-Videla Charlotte Louise	January 12, 1929	069 24 3138
EMPLOYING DEPARTMENT OR AGENCY 007667	LOCATION (City, State, ZIP Code)	

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here if you WANT BOTH optional and regular insurance — [X] (A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the $10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here if you DO NOT WANT OPTIONAL but do want regular insurance — [ ] (B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the $10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here if you WANT NEITHER regular nor optional insurance — [ ] (C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the $10,000 additional optional insurance unless I have the regular insurance.

4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C", COMPLETE THE "STATISTICAL STUB," THEN RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.

SIGNATURE (do not print)

Charlotte L. Bustos-Videla

DATE

15 February 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

[illegible stamp]

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-T
JANUARY 1968
(For use only until April 14, 1968)
176-101

14-00000

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. 1-6	NAME LAST (Print)	FIRST 7-24	MIDDLE
007667	BUSTOS VIDELA	CHARLOTTE	Z

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S MONTH 25-26	DAY 27-28	YEAR 29-30	DEPARTURE O/S MONTH 31-32	DAY 33-34	YEAR 35-36	TYPE OF DATA	CODE 37	O/P USE ONLY 38	39	COUNTRY	CODE 40-42
07	28	67				1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	1			MEXICO	50

TDY DATES OF SERVICE

ARRIVAL O/S MONTH 25-26	DAY 27-28	YEAR 29-30	DEPARTURE O/S MONTH 31-32	DAY 33-34	YEAR 35-36	TYPE OF DATA	CODE 37	O/P USE ONLY 38	39	AREA(S)	CODE 40-42
						2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION					

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

	TRAVEL VOUCHER		DISPATCH
	CABLE	X	DUTY STATUS OR TIME AND ATTENDANCE REPORT
	OTHER (Specify)		

DOCUMENT IDENTIFICATION NO.: FORM 764

DOCUMENT DATE/PERIOD: 2 - 29 JULY 1967

REMARKS

ARRIVAL DATE REPORTED UNDER "OTHER REMARKS" ON DUTY STATUS REPORT.

PREPARED BY

- OCO
- C & L DIVISION, CTBS.
- X C & T DIVISION

X REPORT ANNOTATED AS CONTROL DOCUMENT

DATE: 16 APR 1968

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

SIGNATURE: [signature]

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

14-00000

SECRET
(When Filled In)

OFFICIAL USE ONLY (when filled in)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

SECTION I — BIOGRAPHIC AND POSITION DATA

1. EMP SER NO	2. NAME (Last-First-Middle)	3. SEX	4. DATE OF BIRTH	5. SCHEDULE/GRADE/STEP
007667	BUSTOSVIDELA C Z	F	01/12/29	GS -13-06

6. SD	7. POSITION TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Country, City)
D	OPS OFFICER	WH	MEXICO CITY, MEXICO

SECTION II — AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
~~NO OVERSEAS SERVICE~~			
MEXICO CITY STATION 1st tour		27 JULY 1967	JUNE 1970
2nd tour		1970	—

OVERSEAS DATA
CODED
DATE: INITIALS: S
30 JUN

SECTION III — EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
BACH	ECONOMICS, GENERAL	SYRACUSE UNIV NY	50

FORM 1-67 444J
SECRET
(4-51)

SECRET
(When Filled In)

SECTION IX	MARITAL STATUS			
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried. SPECIFY)				
2. NAME OF SPOUSE (Last) BUSTOS VIDELA	(First) Cesar	(Middle) —	(Maiden)	
3. DATE OF BIRTH Feb 27, 1922	4. PLACE OF BIRTH (City, State, Country) SAN JUAN ARGENTINA			
5. OCCUPATION PROFESSOR	6. PRESENT EMPLOYER UNIVERSIDAD DE LAS AMERICAS, Cholula, MEXICO			
7. CITIZENSHIP USA (naturalized)	8. FORMER CITIZENSHIP(S) COUNTRY(IES) Argentine		9. DATE U.S. CITIZENSHIP ACQUIRED 1956	

SECTION X — DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS

SECTION XI — PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP FROM	TO

DATE	SIGNATURE OF EMPLOYEE
22 June 1970	Charlotte J. Bustos Videla

SECRET

CERTIFICATION OF LANGUAGE PROFICIENCY

1. EMPLOYEE NO.	2. NAME (LAST-FIRST-MIDDLE)	3. TYPE CHANGE (A=ADD, C=CHANGE, D=DELETE) CODE	4. LANGUAGE DATA PRIOR TO TEST (LAN. CODE, R, W, P, S, U, I/T, YEAR)
	BUSTOS-VIDELA, CHARLOTTE		

5. LANGUAGE DATA AFTER TEST (LAN. CODE, R, W, P, S, U, I/T, YEAR)	6. DATE TESTED	7. DATE OF BIRTH	8. GRADE	9. OFFICE OR DIVISION
	10/17/72	01/12/29	13	WH

NOTICE TO PERSON TESTED

10. ON THE DATE SHOWN IN ITEM 6 ABOVE, YOU WERE TESTED IN SPANISH (NEW WORLD) BL18 (NAME OF LANGUAGE) AND YOUR TEST SCORES ARE AS FOLLOWS:

READING	WRITING	PRONUNCIATION	SPEAKING	UNDERSTANDING
N	+	+	I+	H

TEST RATINGS: O = ZERO, I = INTERMEDIATE, S = SLIGHT, H = HIGH, E = ELEMENTARY, N = NATIVE

11. REMARKS
"+" indicates not tested [illegible] Speaking grade.

CL BY 017470
EX-2 IMPDET
WISMI

12. SIGNATURE: RLF

13. LD NUMBER: 20723

FORM 11-64 1273 OBSOLETE PREVIOUS EDITIONS (10-45) CONFIDENTIAL ~~SECRET~~ GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION 1 - OP/QAB

1. ID	2. [illegible] D-DIGITS	3. MUST CONTAIN 20-DIGITS
2		

4. DATE OF BIRTH (MO DA YR)	5. DATE CODED (MO DA YR)	
		THE DATA ABOVE (ITEMS 2 THRU 5) WILL BE FILLED IN WHEN CODING AN APPLICANT FOR THE FIRST TIME. THIS FORM IS THEN ATTACHED TO FORM 1962, MASTER QUALIFICATIONS CODING RECORD.

LANGUAGE CODING DATA - FORM 444c

1. ID	2. EMPLOYEE NO.	3. NAME 3-LETTERS	4. LANGUAGE DATA CODE: BASE CODE	R	W	P	S	U	T	YR
3										

5. DATE SUBMITTED (MO DA YR)	6. DATE OF BIRTH (MO DA YR)	
		WHEN FORM 444c DENOTES NO LANGUAGE COMPETENCE, ENTER THE FOLLOWING IN ITEM 4: "NO++LANGUAGE" (12-DIGITS)

LANGUAGE PROFICIENCY TEST DATA

1. ID	2. EMPLOYEE NO.	3. NAME 3-LETTERS	4. CODE C-A-D	5. LANGUAGE DATA BEFORE TEST: BASE CODE	R	W	P	S	U	T	YR
5	007667	Bus	C	BL18	I	I	H	I	I	4	67

6. LANGUAGE DATA AFTER TEST: BASE CODE	R	W	P	S	U	T	YR	7. DATE OF TEST: MO	DA	YR	
BL18	N	I	H	I	H	4	72	10	17	72	DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 1273, LANGUAGE PROFICIENCY AND AWARDS DATA.

QUALIFICATIONS RECORD CHANGE

1. ID	2. EMP/APPL NO	3. NAME 3-LETTERS	
4			ENTER UNDER "TYPE" - A - ADDITION TO RECORD; C - CHANGE TO EXISTING RECORD; D - DELETION OF DATA FROM EXISTING RECORD

TYPE	CODE # 1 BASE	1	2	3	YR	CODE # 2 BASE	1	2	3	YR

FORM 10-64 1962a SECRET GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

14-00000

SECRET

(WHEN FILLED IN)

CERTIFICATION OF LANGUAGE PROFICIENCY

1. EMPLOYEE NO.	2. NAME (LAST-FIRST-MIDDLE)	3. TYPE CHANGE (A=ADD C=CHANGE D=DELETE)	CODE	4. LANGUAGE DATA PRIOR TO TEST: LAN. CODE	R	W	P	S	U	I/T	YEAR
117667	BUSTOS-VIDELA, CHARLOTTE Z.										

5. LANGUAGE DATA AFTER TEST: LAN. CODE	R	W	P	S	U	I/T	YEAR	6. DATE TESTED	7. DATE OF BIRTH	8. GRADE	9. OFFICE OR DIVISION
								06/22/67	01/12/29	13	WH

NOTICE TO PERSON TESTED

10. ON THE DATE SHOWN IN ITEM 6 ABOVE, YOU WERE TESTED IN SPANISH (NEW WORLD) BL18 (NAME OF LANGUAGE)
AND YOUR TEST SCORES ARE AS FOLLOWS:

READING	WRITING	PRONUNCIATION	SPEAKING	UNDERSTANDING
I	I	H	I	I

TEST RATINGS: 0 = ZERO, I = INTERMEDIATE, S = SLIGHT, H = HIGH, E = ELEMENTARY, N = NATIVE

11. REMARKS

CODED FOR QUALIFICATIONS DATE 25 AUG 1967

12. SIGNATURE

13. LD NUMBER 14168

FORM 11-64 1273 OBSOLETE PREVIOUS EDITIONS (10-45) SECRET GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION 1 - OP/QAB

LANGUAGE PROFICIENCY TEST DATA

1. ID	2. EMPLOYEE NO.	3. NAME 3-LETTERS	4. CODE C-A-D	5. LANGUAGE DATA BEFORE TEST: BASE CODE	R	W	P	S	U	T	YR
5	467667	BUS	C	BL18	H	I	H	H	N	4	60

6. LANGUAGE DATA AFTER TEST: BASE CODE	R	W	P	S	U	T	YR	7. DATE OF TEST: MO	DA	YR
BL18	I	I	H	I	I	4	67	06	22	67

DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 1273 LANGUAGE PROFICIENCY AND AWARDS DATA. 2 OCT 1967

QUALIFICATIONS RECORD CHANGE

1. ID	2. EMP/APPL NO.	3. NAME 3-LETTERS
4		

ENTER UNDER "TYPE" -
A - ADDITION TO RECORD
C - CHANGE TO EXISTING RECORD
D - DELETION OF DATA FROM EXISTING RECORD

TYPE	CODE # 1 BASE	1	2	3	YR	CODE # 2 BASE	1	2	3	YR

FORM 1962a SECRET GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)

LANGUAGE PROFICIENCY AND AWARDS DATA

1. PERSONNEL SERIAL NO (1-6) [illegible]			2. ID NO [illegible]
3. NAME (7-24) LAST FIRST MIDDLE [illegible], Charlotte	4. OFFICE OR DIVISION [illegible]	5. LANGUAGE [illegible]	6. LANG. CODE (25-27) 720
7. DATE OF TEST 46-51 Oct. [illegible] 1960	8. ANNIVERSARY DATE Oct. 11, 196[illegible]	9. GRADE 12	10. DATE OF BIRTH [illegible] 1920

11. REASON FOR TAKING TEST		12. TEST SCORES				
XX	APPLY FOR AWARD	READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)
	ESTABLISH SKILL LEVEL	H	I	H	I	H

13. ELIGIBILITY (39)		14. TYPE OF AWARD			
XX	A	ACHIEVEMENT (A)	ELEMENTARY (E)	READING (R) SPEAKING (S)	BASED ON TRAINING THAT WAS
	M	MAINTENANCE (M)	INTERMEDIATE (I) HIGH (H)	COMPREHENSIVE (C)	DIRECTED (D) OR VOLUNTARY (V)
	NA	A	E-I	C	V

15. INELIGIBLE (REASON)

16. I CERTIFY THIS EMPLOYEE FOR A PROFICIENCY AWARD OF $ 100.00 (40-45)

SIGNATURE | DATE

17. I CERTIFY THAT FUNDS ARE AVAILABLE

OBLIGATION REF. NO. | CHARGE ALLOTMENT NO.

SIGNATURE

REMARKS

FORM 5-60 1273 OBSOLETE PREVIOUS EDITIONS

SECRET (13-45) MRD COPY

14-00000

SECRET
(When Filled In)

PERIODIC SUPPLEMENT
PERSONAL HISTORY STATEMENT

THIS DATE: 10 September 1957

INSTRUCTIONS

This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XIII only where there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.

SECTION I — GENERAL

1. FULL NAME (Last-First-Middle): ZEHRUNG, Charlotte L.
2. CURRENT ADDRESS (No., Street, City, Zone, State): 3817 Davis Place, N. W., Washington
3. PERMANENT ADDRESS (No., Street, City, Zone, State): 5536 South Dixie Highway, Dayton 9, Ohio
4. HOME TELEPHONE NUMBER: Em 2-1618
5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE: Ohio

SECTION II — PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

1. NAME (Last-First-Middle) PREFERABLY RESIDING IN U.S.: ZEHRUNG, Samuel Danford
2. RELATIONSHIP: Father
3. HOME ADDRESS (No., Street, City, Zone, State, Country): 5536 South Dixie Highway, Dayton 9, Ohio
4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country). INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE: 5536 South Dixie Highway, Dayton 9, Ohio. San Rae Gardens
5. HOME TELEPHONE NUMBER: MO 3-3511
6. BUSINESS TELEPHONE NUMBER: MO 3-3511
7. BUSINESS TELEPHONE EXTENSION: None
8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE.

SECTION III — MARITAL STATUS

1. CHECK (X) ONE: [X] SINGLE [ ] MARRIED [ ] WIDOWED [ ] SEPARATED [ ] DIVORCED [ ] ANNULLED
2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancé.

3. NAME (First) (Middle) (Maiden) (Last)
4. DATE OF MARRIAGE
5. PLACE OF MARRIAGE (City, State, Country)
6. ADDRESS OF SPOUSE BEFORE MARRIAGE (No., Street, City, State, Country)
7. LIVING: YES / NO
8. DATE OF DEATH
9. CAUSE OF DEATH
10. CURRENT ADDRESS (Give last address, if deceased)
11. DATE OF BIRTH
12. PLACE OF BIRTH (City, State, Country)
13. IF BORN OUTSIDE U.S., DATE OF ENTRY
14. PLACE OF ENTRY
15. CITIZENSHIP (Country)
16. DATE ACQUIRED
17. WHERE ACQUIRED (City, State, Country)
18. OCCUPATION
19. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers)
20. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country)

USED FOR QUALIFICATIONS
DATE 11 JUL 1958

SECTION III CONTINUED TO PAGE 2

SECRET
(When Filled In)

SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE OF SPOUSE (From- and To-) BY MONTH AND YEAR

22. BRANCH OF SERVICE	23. COUNTRY WITH WHICH MILITARY SERVICEAFFILIATED

24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1	1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
2	1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
3	1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
4	1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT

5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? [X] YES [ ] NO

2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? [ ] YES [X] NO IF YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.

3. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? [ ] YES [X] NO

4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.

5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS.

SECTION V CONTINUED TO PAGE 3

SECRET

SECRET
(When Filled In)

SECTION V CONTINUED FROM PAGE 2

6. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION	ADDRESS (City, State, Country)
Citizens Federal Savings & Loan Assn.	Dayton, Ohio
Riggs National Bank	Washington, D. C.

7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? [ ] YES [X] NO

8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)

SECTION VI — CITIZENSHIP

1. COUNTRY OF CURRENT CITIZENSHIP: US

2. CITIZENSHIP ACQUIRED BY (Check (X) one): [X] BIRTH [ ] MARRIAGE [ ] OTHER (Specify):

3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? [ ] YES [X] NO

4. GIVE PARTICULARS

5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (First papers, etc.)

SECTION VII — EDUCATION

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED

[ ]	LESS THAN HIGH SCHOOL GRADUATE	[ ]	OVER TWO YEARS OF COLLEGE - NO DEGREE
[ ]	HIGH SCHOOL GRADUATE	[ ]	BACHELOR'S DEGREE
[ ]	TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE	[ ]	GRADUATE STUDY LEADING TO HIGHER DEGREE
[ ]	TWO YEARS COLLEGE OR LESS	[ ]	MASTER'S DEGREE [ ] DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT: MAJOR	SUBJECT: MINOR	DATES ATTENDED: FROM	DATES ATTENDED: TO	DEGREE REC'D	DATE REC'D	SEM/QTR HRS. COMPLETED (Specify)

3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED: FROM	DATES ATTENDED: TO	TOTAL HOURS

4. MILITARY TRAINING (Full time duty in specialized schools such as Defense, Intelligence, Communications, etc.)

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED: FROM	DATES ATTENDED: TO	TOTAL WEEKS

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

SECRET

SECRET
(When Filled In)

SECTION X CONTINUED FROM PAGE 4

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.)

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

SECTION XI ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1
1. INCLUSIVE DATES (From- and To-): 27 Aug 51 - 27 Apr 52
2. GRADE: 5
3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT: DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION: 0
5. OFFICIAL POSITION TITLE: Secretary (Steno)
6. DESCRIPTION OF DUTIES:

2
1. INCLUSIVE DATES (From- and To-): 27 Apr 52 - 27 Sept 53
2. GRADE: 7
3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT: DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION:
5. OFFICIAL POSITION TITLE: Intell Officer (Rpts)
6. DESCRIPTION OF DUTIES: All duties of Reports Officer

3
1. INCLUSIVE DATES (From- and To-): 27 Sept 53 - 10 Apr 55
2. GRADE: 9
3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT: DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION: one to two
5. OFFICIAL POSITION TITLE: Reports Officer
6. DESCRIPTION OF DUTIES: Duties of Chief reports officer ax

4
1. INCLUSIVE DATES (From- and To-): 10 Apr 55 - June 1957
2. GRADE: 11
3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT: DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION: one - two
5. OFFICIAL POSITION TITLE: Chief Reports Officer
6. DESCRIPTION OF DUTIES:

5
1. INCLUSIVE DATES (From- and To-): June 1957 - present
2. GRADE: 11
3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT: DDP/WH/III (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION:
5. OFFICIAL POSITION TITLE: Reports Officer
6. DESCRIPTION OF DUTIES:

(Use additional pages if required)

SECRET

OFFICE OF PERSONNEL
SEP 12 3 42 PM '57
MAIL ROOM

SECTION XII — **CHILDREN AND OTHER DEPENDENTS**

1. NUMBER OF CHILDREN (*Including stepchildren and adopted children*) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.

2. NUMBER OF OTHER DEPENDENTS (*Including spouse, parents, stepparents, sister, etc.*) WHO DEPEND ON YOU FOR AT LEAST 50% OF THEIR SUPPORT, OR, CHILDREN 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING.

3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS

NAME	RELATIONSHIP	YEAR OF BIRTH	SEX M	SEX F	CITIZENSHIP	ADDRESS

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS

DATE COMPLETED	SIGNATURE OF EMPLOYEE
10 Sept 57	Charlene L. [signature]

SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)	LANGUAGE PROFICIENCY AND AWARDS DATA	2. L D NO.
[illegible]		[illegible]

3. NAME (7-24)	4. COMPONENT	5. GRADE	6. DATE OF BIRTH
[illegible]	[illegible]	[illegible]	[illegible]

7. LANGUAGE	8. CODE (25-27)	9. DATE OF TEST	10. ANNIVERSARY DATE (28-33)
Spanish	[illegible]	[illegible]	[illegible]

11. TEST PURPOSE	12. TEST SCORES: READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	13. ELIGIBILITY (39)
AWARD / SKILL	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	AWARDABLE A M / NOT AWARDABLE

14. I CERTIFY THIS EMPLOYEE FOR AWARD

SIGNATURE	DATE

15. TYPE OF AWARD

A-M	S-I-N	C	R-W-S	D-V
[illegible]	[illegible]		[illegible]	

16. AMOUNT OF AWARD	$ 100.00
18. FEDERAL TAX DEDUCTION	$
19. STATE/DC TAX DEDUCTION	$
21. NET AMOUNT OF AWARD	$

17. I CERTIFY THAT FUNDS ARE AVAILABLE

OBLIGATION REF. NO.	SIGNATURE

20. CHARGE ALLOTMENT NO.	DATE

22. EMPLOYEE PAYROLL NO.

23. FORWARD CHECK TO

24. ALLOTMENT OF ASSIGNMENT

25. CHECK NO.	DATE

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SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)	LANGUAGE PROFICIENCY AND AWARDS DATA	2. L D NO.
[illegible]		[illegible]

3. NAME (7-24)	4. COMPONENT	5. GRADE	6. DATE OF BIRTH
[illegible]	[illegible]	[illegible]	[illegible]

7. LANGUAGE	8. CODE (25-27)	9. DATE OF TEST	10. ANNIVERSARY DATE (28-33)
Spanish	[illegible]	[illegible]	[illegible]

11. TEST PURPOSE	12. TEST SCORES: READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	13. ELIGIBILITY (39)
AWARD / SKILL	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	AWARDABLE A M / NOT AWARDABLE

14. I CERTIFY THIS EMPLOYEE FOR AWARD

SIGNATURE	DATE

15. TYPE OF AWARD

A-M	S-I-N	C	R-W-S	D-V
[illegible]	[illegible]		[illegible]	

16. AMOUNT OF AWARD	$ [illegible]
18. FEDERAL TAX DEDUCTION	$
19. STATE/DC TAX DEDUCTION	$
21. NET AMOUNT OF AWARD	$

17. I CERTIFY THAT FUNDS ARE AVAILABLE

OBLIGATION REF. NO.	SIGNATURE

20. CHARGE ALLOTMENT NO.	DATE

22. EMPLOYEE PAYROLL NO.

23. FORWARD CHECK TO
[illegible]
[illegible]

24. ALLOTMENT OF ASSIGNMENT

25. CHECK NO.	DATE

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SECRET
(When Filled In)

(1-6)	
107667	**LANGUAGE DATA RECORD**

PART I—GENERAL

1. NAME (Last-First-Middle) (7-24)	2. DATE OF BIRTH (25-30) MONTH	DAY	YEAR
ZEHRUNG, Charlotte Louise	January	12	1929

3. LANGUAGE (31-33)	4. TODAY'S DATE (34-39) MONTH	DAY	YEAR	5.
Spanish 720	April	2	1957	☐ I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE

PART II—LANGUAGE ELEMENTS

SECTION A. Reading (40)

1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.
$\textcircled{2}$ I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.
5. I HAVE NO READING ABILITY IN THE LANGUAGE.

SECTION B. Writing (41)

1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.
$\textcircled{3}$ I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.
5. I CANNOT WRITE IN THE LANGUAGE.

SECTION C. Pronunciation (42)

1. MY PRONUNCIATION IS NATIVE.
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.
$\textcircled{3}$ MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.
5. I HAVE NO SKILL IN PRONUNCIATION.

CONTINUE ON REVERSE SIDE

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D. Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
$\textcircled{3}$ I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E. Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
$\textcircled{3}$ I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
$\textcircled{4}$ NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR, 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED	SIGNATURE
2 April 1957	Charlotte L. [illegible]

(46)	(47)
C	7

14-00000

DEADLINE: 29 Sept. 1952

SECRET
Security Information

ZEHRUNG, Charlotte L.
Name: Last, First Middle

CHARGED FOR
DATE 10-8-52

TO: All C. I. A. Personnel

FROM: Personnel Director

SUBJECT: PERSONNEL QUALIFICATION QUESTIONNAIRE

1. The Agency is currently revising the system for machine coding employee qualifications, thereby permitting more complete and accurate data on all personnel. The new system will aid in implementing Agency policies on promotion from within by facilitating the selection of personnel with desired education and experience for vacancies which may occur. It is also expected that the new system will provide readily accessible statistics for planning and management purposes.

2. The attached questionnaire is designed to cover adequately those factors in which the Agency is interested. Although the information is, in a large measure, already reflected in previous forms submitted by you, it is felt that your time within the organization may enable you to emphasize those qualifications pertinent to its needs. The questionnaire also serves to bring your education and qualifications record up to date.

3. Your cooperation is requested in completing the questionnaire as thoroughly and accurately as possible and returning it to your Administrative Officer within the time allotted.

George E. Meloon
George E. Meloon
Personnel Director

SECRET
Security Information

FORM NO. 37-132
MAY 1952

SECRET
Security Information

PERSONNEL QUALIFICATION QUESTIONNAIRE

1. Serial No. (no entry)	2. NAME: (last) (first) (middle)	3. Office
7667	ZEHRUNG, Charlotte Luise	FI
4. Date of Birth: 12 Jan. 1929	5. Sex: ___ male (1) x female (2); Martial Status s; Nr. Dependents 0	6. CIA Entry Date: August 1951
7. Citizenship: x U.S. ___ Other	8. Acquired By: (1) x Birth (2) ___ Marriage (3) ___ Naturalization (4) ___ Other(specify) Year U.S. citizenship acquired, if not by birth ___	

SEC. I. EDUCATION

1. Extent: (circle one)
   1. Less than high school
   2. High school graduate
   3. Trade, Business or Commercial school graduate
   4. Two years college, or less
   5. Over two years, no degree
   $\textcircled{6}$ Bachelor degree
   7. Post-graduate study (minimum 8 sem. hrs.)
   8. Masters degree
   9. Doctors degree

2. College or University Study:

Name and location of College or University	Major	Minor	Dates att'd From	Dates att'd To	Yrs Compl Day	Yrs Compl Night	Degree Recd Title	Degree Recd Date	Sem Hrs
Syracuse University	Econ.	Span.	9/46	1/50	4		B. A.	1/50	115
San Carlos University	Span.		7/48	8/48					5

3. Trade, Commercial, and Specialized Training:

School	Attendance Dates From	To	Tot. mo's	Study or Specialization
Miami Jacobs Business College	5/50	12/50	7	typing and shorthand

4. Military or Intelligence Training (full time duty as a student in specialized schools such as intelligence, communications, ordnance disposal, command & staff, etc.)

School	Attendance Dates From	To	Tot. mo's	Study or Specialization

SECRET
Security Information

SECRET
Security Information

SEC. II. WORK EXPERIENCE

1. **CIA Experience: State the specific nature of duties performed with CIA and CIG, starting with your present position. Take position titles from your official personnel papers, if you have personal copies. Please do not request your Official Personnel Folder. Include geographic area and subject matter dealt with, if applicable. Position Title is your classification title such as Geographer, Intelligence Officer, etc. Duty Title indicates your organization position such as - Section Chief, Branch Chief, Administrative Assistant, etc., and is to be filled in only if different to the Position Title. Approximate dates (month and year) are sufficient. Use a continuation sheet, if necessary, to adequately describe your duties.**

From 4/52 To ____ Tot. mos. ____	Description of Duties: I have the responsibility of disseminating and routing all reports received from our Station, take appropriate action on reports received from other agencies by forwarding this information to the field or supplying requested data. I inform the field of additional info at Headquarters on individuals and organizations as requested or as deemed necessary. I also maintain two CE notebooks.
Grade 7 Salary 3/20?.00	
Office FI/WH/Brazil	
Position Title: Intelligence Officer	
Duty Title: Reports Officer	Duty Station, if overseas:
From 12/51 To 4/52 Tot. mos. 5	Description of Duties: Same as above with a Sub-station. I had less individual responsibility.
Grade 5 Salary 3410.00	
Office FI/WH/Brazil	
Position Title: Intelligence Officer	
Duty Title: Reports Officer	Duty Station, if overseas:
From 11/51 To ____ Tot. mos. 1	Description of Duties: As a casual I typed dispatches, memoranda, and disseminations for Branch II. I took a limited amount of shorthand.
Grade 5 Salary 3410.00	
Office FI/EE/II	
Position Title: Secretary (Stenography)	
Duty Title:	Duty Station, if overseas:
From 9/51 To ____ Tot. mos. 1	Description of Duties: I assembled disseminated reports.
Grade 5 Salary 3410.00	
Office RC	
Position Title: Secretary (Stenography)	
Duty Title:	Duty Station, if overseas:

Two months in the pool attending classes and setting up filing system for Russian Index cards.

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Security Information

SEC. II. WORK EXPERIENCE (CONT'D.)

2. Other than CIA: (Describe work experience for the last 15 years in sufficient detail to permit specific coding of your qualifications. Include military work experience. List last position first.)

From 4/51 To 8/51 Tot. mo's 4 Classification Grade (if in Federal Service) 3 Salary $2650.00 Number and Class of Employees Supervised: none Employer Department of Interior Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position Statistical [illegible]raftsman Description of Duties: I did statistical drafting, cartography, [illegible] [illegible] Duty Station if overseas:
From 5/50 To 3/51 Tot. mo's 11 Classification Grade (if in Federal Service) Salary 1.[illegible] /hr. Number and Class of Employees Supervised: 2 - 6 clerks Employer [illegible] Kind of Business or organization (i.e., paper products mfr, public utility) [illegible] and Gift Shoppe	Exact Title of your position Description of Duties: As an assistant to the executives I was responsible for purchasing stock for the gift shoppe and [illegible] clerks and greenhouse employees. I had full responsibility of the books and cash. I made reports on the business and acted as sales clerk for the shoppe and [illegible] landscaping business Duty Station if overseas:
From 2/50 To 5/50 Tot. mo's 4 Classification Grade (if in Federal Service) Salary $200 / mo. Number and Class of Employees Supervised: Employer National Peanut Council Kind of Business or organization (i.e., paper products mfr, public utility) trade association	Exact Title of your position Assistant Bookkeeper Description of Duties: I made monthly financial reports, had the responsibility of the books, did typing and other general office work. Duty Station if overseas:
From 6/47 To 8/47 Tot. mo's 3 Classification Grade (if in Federal Service) Salary Number and Class of Employees Supervised: Employer Frigidaire Co., Gen. Motors. Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position Description of Duties: I worked one month in the office of the Chemical [illegible]aboratory and two months in the factory. Duty Station if overseas:
From To Tot. mo's Classification Grade (if in Federal Service) Salary Number and Class of Employees Supervised: Employer Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position Description of Duties: Duty Station if overseas:

SEC. II. WORK EXPERIENCE (CONT'D)

3. Special Work Experience: Check any of the following organizations by which you may have been employed.

01 ___ U.S. Secret Service
02 ___ Civil Police
03 ___ Military Police
04 ___ U.S. Border Patrol
05 ___ U.S. Narcotics Squad
06 ___ FBI
07 ___ Criminal Investigation Div.
21 ___ Office of Naval Intelligence
22 ___ Office of War Information
23 ___ Army G-2
20 ___ Office of Strategic Services
24 ___ Air Force A-2
25 ___ Foreign Economic Admin.
26 ___ Counter Intelligence Corps
27 ___ Immigration & Naturalization
28 ___ Strategic Services Unit
29 ___ Foreign Service, State Dept.
30 ___ Central Intelligence Group
31 ___ Armed Forces Security Agency
32 ___ Coordinator of Information
33 ___ Office of Facts & Figures
34 ___ Board of Economic Warfare
35 ___ Federal Communications Comm.

SEC. III. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

LANGUAGE	COMPETENCE						HOW ACQUIRED			
	Equivalent to Native Fluency *	Fluent but obviously Foreign *	Adequate for Research **	Adequate for Travel	Limited Knowledge		Native of Country	Prolonged Residence	Contact (Parents, etc.)	Academic Study (Inc. CIA training)
Spanish		x						x		x
French				x						x
Portuguese			x							x

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein ______

** Specialized Language Competence: Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality. ______

SEC. IV. AREA KNOWLEDGE.

1. List below any foreign countries or regions of which you have knowledge gained as a result of residence, travel or study. Study can mean either academic study, or study of a foreign country resulting from an intelligence, military, commercial or professional work assignment.

Country or Region	Dates of Residence, Study Etc.	Manner in Which Knowledge Was Aquired (check (X) one)		
		Residence	Travel	Study
South America	1 sem econ and geog.			x
Guatemala	7/48 to 8/48	x		
Mexico	7/46		x	

2. Specialized Knowledge of Area
List specalized knowledge of foreign country such as knowledge of terrain, coasts and harbors, utilities, railroads, industries, political parties, etc., gained as a result of study or work assignment. Include name of employer or organization.

Country	Type of Knowledge	How and When Gained

SEC. V. TYPING AND STENOGRAPHIC SKILLS (PRESENT UTILIZATION)

Skill	Per Cent of Time Used	Not Used	WPM (Approximate Proficiency)	Prefer Assignment Using Skill Oftener
Typing	1. drafts	2.	60	1. Yes 2. x No
Shorthand	1. none	2.	70	1. Yes 2. x No
Shorthand System: 1. x Manual 2. Machine 3. Speedwriting.				

SEC. VI. LICENSES, HOBBIES, SPECIAL QUALIFICATIONS

1. Licenses: List any licenses or certification such as teachers, pilot, marine, etc.	2. Hobbies: List any hobbies such as sailing, skiing, writing, or other special qualifications.
	painting, skiing

SEC. VII. PROFESSIONAL AND ACADEMIC HONORS

List any professional or academic associations or honorary societies in which you hold membership.

SEC. VIII. PUBLICATIONS

List below the type of writing (non-fiction: professional or scientific articles, general interest subjects, current events, etc; fiction: novels, short stories, etc.) of any published materials of which you were author or co-author.

SEC. IX. INVENTIONS

Describe any devices you have invented as to type of work for which intended and whether patented.

Device	Patented	
	(1) Yes	(2) No
	(1) Yes	(2) No
	(1) Yes	(2) No

SEC. X. CIA TESTS

Describe below the type of tests which you have taken in CIA:

Type of Test	Date Taken
typing, shorthand, general intelligence exam	8/1951
exam for reports officer	2/19[illegible]2

SEC. XI. PHYSICAL HANDICAPS

List any physical handicaps you may have.

SEC. XII. OVERSEAS ASSIGNMENT

Are you willing to accept periodic tour of duty overseas?

(1) 2 year Tour ___ (2) 4 year Tour ___ (3) Not interested ___.

SEC. XIII. WORK ASSIGNMENT

In view of your total experience and education, for what assignment in CIA do you think you are best qualified?

I feel I am best qualified for a reports or research position.

SEC. XIV. MILITARY STATUS

1. Present Draft Status
   Have you registered under the Selective Service Act of 1948? ___ Yes ___ No.
   If yes, indicate your present draft classification ____________

2. Present Reserve or National Guard Status
   Do you now have Reserve or National Guard Status ___ Yes ___ No.
   If yes, complete the following.
   1. ___ National Guard
   2. ___ Air National Guard
   3. ___ Active Reserve Status (member of organized unit)
   4. ___ Inactive Reserve Status

   Service ____________ Grade ____________ Location ____________

   Reserve Unit with which currently affiliated ____________

   Service Mobilization Assignment, if any ____________

   Location of Service Records, if known ____________

SEC. XV. CIA TRAINING

List the training courses or subjects you have taken while in the CIA.

Course or Subject	(from) Dates (to)	Hours
Orientation course	8-11 Jan 1952	9-12 am

SEC. XVI. REMARKS

Use this space to indicate any other qualifications you may have which you do not describe above.

DATE 18 September 1952

SIGNATURE [signature]

14-00000

STANDARD FORM 57—NOV. 1947
U. S. CIVIL SERVICE COMMISSION

[AP]PLICATION FOR FEDERA[L E]MPLOY[MEN]T

INSTRUCTIONS: In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type-write or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

1. NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR

2. OPTIONS (if mentioned in examination announcement)

3. PLACE OF EMPLOYMENT APPLIED FOR (City and State): Washington, D. C.

4. DATE OF THIS APPLICATION

5. MR / MRS / MISS (First name) (Middle) (Maiden, if any) (Last): Charlotte L. Zehrung

6. (A) STREET AND NUMBER OR R. D. NUMBER: 1401 - 16th St., N. W.

(B) CITY OR POST OFFICE (including postal zone) AND STATE: Washington, D. C.

7. LEGAL OR VOTING RESIDENCE (State): Ohio

8. (A) OFFICE PHONE: RE 1820 X 732 (B) HOME PHONE: NO 5450

9. DATE OF BIRTH (month, day, year): 1-12-29

10. ☐ MARRIED ☒ SINGLE

11. PLACE OF BIRTH (city and State; if born outside U. S., name city and country): Dayton, Ohio

12. ☐ MALE ☒ FEMALE

13. (A) HEIGHT WITHOUT SHOES: 5 FEET 8 INCHES (B) WEIGHT: 125 POUNDS

14. (A) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? ☐ YES ☒ NO

(B) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE

APPLICATION NO.

ANNOUNCEMENT

DO NOT WRITE IN THIS BLOCK
For Use of Civil Service Commission Only

☐ APPOR. ☐ NON-APPOR. | MATERIAL ☐ SUBMITTED ☐ RETURNED | ENTERED REGISTER:

NOTATIONS: | APP. REVIEW: | APPROVED:

OPTION	GRADE	EARNED RATING	PREFERENCE	AUGM. RATING
			☐ 5 POINTS (TENT.)	
			☐ 10 POINTS	
			☐ WIFE OR WIDOW	
			☐ DISAL.	
			☐ BEING INVESTIGATED	
INITIALS AND DATE				

15. (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? $ .... PER YEAR
You will not be considered for any position with a lower entrance salary.

(B) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED, FOR: ☐ 1 TO 3 MONTHS ☐ 3 TO 6 MONTHS ☐ 6 TO 12 MONTHS

NOTE. *Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.*

(C) IF YOU ARE WILLING TO TRAVEL, SPECIFY: ☐ OCCASIONALLY ☐ FREQUENTLY ☐ CONSTANTLY

(D) CHECK IF YOU WILL ACCEPT APPOINTMENT IF OFFERED: ☐ IN WASHINGTON, D. C. ☐ ANYWHERE IN THE UNITED STATES ☐ OUTSIDE THE UNITED STATES

(E) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS

16. EXPERIENCE: It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, welfare or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.

(a) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

① PRESENT POSITION

DATES OF EMPLOYMENT (month, year): FROM 4-51 TO PRESENT TIME

EXACT TITLE OF YOUR PRESENT POSITION: Statistical Draftsman

CLASSIFICATION GRADE (if in Federal Service): 3

SALARY OR EARNINGS: STARTING $ 2650 PER yr. PRESENT $ PER

PLACE OF EMPLOYMENT (city and State): Washington, D. C.

NAME AND TITLE OF IMMEDIATE SUPERVISOR: Mrs. Mildred Moorman

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division): Board of Geographical Names, Department of Interior

KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU: none

REASON FOR WISHING TO CHANGE EMPLOYMENT

DESCRIPTION OF YOUR WORK:

statistical drafting
typing
marking diacritics

(CONTINUED ON NEXT PAGE)

16 CONTINUED

② DATES OF EMPLOYMENT (month, year) FROM 5/50 TO 3/51
EXACT TITLE OF YOUR POSITION: Bookkeeper-Clerk
CLASSIFICATION GRADE (if in Federal service):
SALARY OR EARNINGS: STARTING $ 1.00 PER hr; FINAL $ 1.10 PER hr

PLACE OF EMPLOYMENT (city and State): Dayton, Ohio
NAME AND TITLE OF IMMEDIATE SUPERVISOR: Mr. Ray F. McKechnie

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division): San Rae Gardens, R. R. 11 Dayton 9, Ohio
KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacture of locks, etc.): Nursery and Gift Shoppe

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU: 2 - 6 clerks
REASON FOR LEAVING: New Job

DESCRIPTION OF YOUR WORK
Bookkeeper
Clerk
Made reports on stock and ordered wholesale
Made reports for the executives on the business, finances, etc.

③ DATES OF EMPLOYMENT (month, year) FROM: 2/50 TO 5/50
EXACT TITLE OF YOUR POSITION: Ast. Bookkeeper
CLASSIFICATION GRADE (if in Federal service):
SALARY OR EARNINGS: STARTING $ PER; FINAL $ 200 PER mo

PLACE OF EMPLOYMENT (city and State): Washington, D. C.
NAME AND TITLE OF IMMEDIATE SUPERVISOR: Mr. William F. Seals, Pres.

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division): National Peanut Council, 1111 Dupont Circle Bldg. Washington, D. C.
KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacture of locks, etc.): Trade Association

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU: none
REASON FOR LEAVING: New Job

DESCRIPTION OF YOUR WORK
Bookkeeping
Filing
General office work
Financial reports

④ DATES OF EMPLOYMENT (month, year) FROM 6/47 TO 8/47
EXACT TITLE OF YOUR POSITION:
CLASSIFICATION GRADE (if in Federal service):
SALARY OR EARNINGS: STARTING $ PER; FINAL $ PER

PLACE OF EMPLOYMENT (city and State): Dayton, Ohio
NAME AND TITLE OF IMMEDIATE SUPERVISOR: Mr. Herbert Hauldorman Personnel

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division): Frigidaire, Plant 2 Dayton 9, O
KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacture of locks, etc.): Manuf. of Frigidaires

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU: none
REASON FOR LEAVING: return to college

DESCRIPTION OF YOUR WORK
Secretary in Chemical Labs.
Worked in factory

⑤ DATES OF EMPLOYMENT (month, year) FROM / TO	EXACT TITLE OF YOUR POSITION	CLASSIFICATION GRADE (if in Federal service)	SALARY OR EARNINGS STARTING $ PER / FINAL $ PER

PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person. If Federal, name department, bureau or establishment, and division)	KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU	REASON FOR LEAVING

DESCRIPTION OF YOUR WORK

If more space is required, use a continuation sheet (Standard Form No. 58) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

17. MILITARY TRAINING: In the space below, describe any training received in the Armed Services (not already listed under Item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service schools you attended is especially important. (Extra pages may be used to give full descriptions.)

DATES FROM	DATES TO	LOCATION	DESCRIPTION OF TRAINING

18 EDUCATION (Circle highest grade completed):

1 2 3 4 5 6 7 8 9 10 11 12

MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION OF

[X] ELEMENTARY SCHOOL [X] JUNIOR HIGH SCHOOL [X] SENIOR HIGH SCHOOL

(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED

(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED

(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY	MAJOR AND SPECIALTY	DATES ATTENDED FROM	DATES ATTENDED TO	YEARS COMPLETED DAY	YEARS COMPLETED NIGHT	DEGREES CONFERRED TITLE	DEGREES CONFERRED DATE	SEMESTER HOURS CREDIT
Syracuse Univ, Syracuse, N.Y.	Econ.	9-46	1-50	4		BA	1-50	115
San Carlos Univ, Guatemala City	Span	7-48	8-48					5
Miami Jacobs Business College Dayton, O.	Steno.	5-50	12-50	3 mo	4mo			

(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS	SEMESTER HOURS	LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS	SEMESTER HOURS
Economics	30		
Spanish	23		

(E) OTHER TRAINING SUCH AS VOCATIONAL, BUSINESS, STUDY COURSES GIVEN THROUGH THE ARMED FORCES INSTITUTE (show name and location of school) OR IN-SERVICE TRAINING IN PUBLIC OR PRIVATE EMPLOYMENT	SUBJECTS STUDIED	DATES ATTENDED FROM	DATES ATTENDED TO	YEARS COMPLETED DAY	YEARS COMPLETED NIGHT

19 INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES

LANGUAGE	READING EXC.	READING GOOD	READING FAIR	SPEAKING EXC.	SPEAKING GOOD	SPEAKING FAIR	UNDERSTANDING EXC.	UNDERSTANDING GOOD	UNDERSTANDING FAIR
Spanish	x				X		X		
French		x				x			x

20 IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRY, INDICATE (1) NAMES OF COUNTRIES (2) DATES AND LENGTH OF TIME SPENT THERE, AND (3) REASON OR PURPOSE (e.g., military service, business, education, recreation)

Guatemala 7/48-8/48 Education
Mexico 7/46 Travel

21 LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE SUCH AS OPERATING RADIO, BAND, DRAFTING, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES

Calculator

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 60 SHORTHAND 70

22 ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)?

[ ] YES [X] NO GIVE KIND OF LICENSE AND STATE.

FIRST LICENSE OR CERTIFICATE (YEAR)

LATEST LICENSE OR CERTIFICATE (YEAR)

23 GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS (A) YOUR MOST IMPORTANT PUBLICATIONS (do not submit copies unless requested) (B) YOUR PATENTS OR INVENTIONS (C) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE (D) MEMBERSHIP IN PROFESSIONAL OR SCIENTIFIC SOCIETIES, ETC. (E) HONORS AND FELLOWSHIPS RECEIVED.

24. REFERENCES: List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 16 (EXPERIENCE)

FULL NAME	PRESENT BUSINESS OR HOME ADDRESS (Give complete current address, including street and number)	BUSINESS OR OCCUPATION
1. Mr. John Lewis	Oakwood High School, Dayton 9, O.	Principal
2. Miss Theadosia Moran	Cazanovia R. D. 2, N. Y.	Teacher
3. Mr. Harry Schwartz	Univ. of Syracuse, Syracuse, N. Y.	Professor

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
25. MAY INQUIRY BE MADE OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC.?	X	
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X	
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY, U. S. A., OR ANY COMMUNIST ORGANIZATION?		X
28. ARE YOU NOW, OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?		X
29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR OF AN ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?		X
If your answer to question 27, 28, or 29 above is "yes," state in Item 39 the names of all such organizations, associations, movements, groups, or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein		
30. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING OR CONVICTED, FINED, OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF $25 OR LESS WAS IMPOSED)? *If your answer is "Yes," list all such cases under Item 39 below. Give in each case (1) the date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken*		X
31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? *If your answer is "Yes," give in Item 39 the name and address of employer, date, and reason in each case*		X
32. HAVE YOU EVER BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS? *If your answer is "Yes," give dates of and reasons for such debarment in Item 39*		X
33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? *If your answer is "Yes," give complete details in Item 39 so that consideration can be given to your physical fitness for the job.*		X
34. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? *If your answer is "Yes," give complete details in Item 39*		X

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
35. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY OR MUNICIPALITY? *If your answer is "Yes," give details in Item 39*		X
36. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS (BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? *If your answer is "Yes," show in Item 39 for EACH such relative (1) full name; (2) present address; (3) relationship; (4) Department or Agency by which employed, and (5) kind of appointment*		X

SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE

A. If you are claiming preference as a **PEACETIME VETERAN** *who has been awarded a campaign badge or service ribbon, or as a* **DISABLED VETERAN,** *or as the* **WIFE OF A DISABLED VETERAN,** *or as the* **WIDOW OF A WAR OR CAMPAIGN VETERAN,** *attach Veteran Preference Claim, CSC Form 14, together with proof specified therein.*

B. If you are a **WAR-TIME VETERAN** *not claiming disability preference you should* **NOT** *submit your discharge with this application. Preference will be tentatively credited to you and if appointed, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in time of war.*

	YES	NO
37. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR?		X
(B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION?		
(C) WAS SERVICE PERFORMED ON AN ACTIVE FULL-TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCES?		

(D) DATE OF ENTRY OR ENTRIES INTO SERVICE	DATE OF SEPARATION OR SEPARATIONS
BRANCH OF SERVICE *(Army, Navy, Marine Corps, Coast Guard, etc.)*	SERIAL NO. *(If none, give grade or rating at time of separation).*

	YES	NO
38. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE IN ANY PEACETIME ONLY, DID YOU SERVE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON?		X
(B) ARE YOU A DISABLED VETERAN? *If so, and you have not listed your disability in answer to Item 33, explain in Item 39 below*		
(C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED?		
(D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE CONNECTED DISABILITY WHICH DISQUALIFIES HIM FOR CIVIL SERVICE APPOINTMENT?		

THIS SPACE FOR USE OF APPOINTING OFFICER ONLY

The information contained in the answers to Question 37 above has been verified by comparison with the discharge certificate on ...., 19.....

Agency: .... Title: ....

39. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (indicate item numbers to which answers apply)

ITEM NO.		ITEM NO.	

If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

Before signing this application check back over it to make sure that you have answered ALL questions correctly.

I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80)

SIGNATURE OF APPLICANT: Miss Charlotte R. Zehms [signature]

(Sign your name in INK (one given name, initials or initials, and surname). If female, give Miss or Mrs. and if married your own given name as "Mrs. Mary L. Doe")

14-00000

As of 5 July, 1951, Subject's Washington address is

3817 Davis place, N.W.
phone - ORdway 1618

14-00000

PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA.". Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? yes (Yes or No)

SEC. 1. PERSONAL BACKGROUND

Telephone:
Office RE 1820
Ext. 4691
Home NO 5450

A. FULL NAME (Use No Initials) Miss Charlotte (First) Louise (Middle) Zehrung (Last)

PRESENT ADDRESS 1401-16th St. N. W. (St. and Number) Washington (City) D. C. (State) USA (Country)

PERMANENT ADDRESS San Rae Gardens (St. and Number) Dayton 9 (City) Ohio (State) RR 11 USA (Country)

B. NICKNAME Sherri WHAT OTHER NAMES HAVE YOU USED? none

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? started to use it at school

HOW LONG? 5 yrs IF A LEGAL CHANGE, GIVE PARTICULARS

(Where?) (By what authority)

C. DATE OF BIRTH 1/12/29 PLACE OF BIRTH Dayton (City) Ohio (State) USA (Country)

D. PRESENT CITIZENSHIP USA (Country) BY BIRTH? yes BY MARRIAGE? no

BY NATURALIZATION CERTIFICATE NO. no ISSUED (Date) BY (Court)

AT (City) (State) (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? no (Yes or No) (Country)

HELD BETWEEN WHAT DATES? TO ANY OTHER NATIONALITY? (Country)

GIVE PARTICULARS

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? no GIVE PARTICULARS:

38-1

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? ....

PORT OF ENTRY? .... ON PASSPORT OF WHAT COUNTRY? ....

LAST U. S. VISA .... (Number) (Type) (Place of Issue) (Date of Issue)

SEC. 2. PHYSICAL DESCRIPTION

AGE 22 SEX F HEIGHT 5' 8" WEIGHT 125

EYES blue HAIR brown COMPLEXION med. SCARS none

BUILD slender OTHER DISTINGUISHING FEATURES ....

SEC. 3. MARITAL STATUS

A. SINGLE x MARRIED .... DIVORCED .... WIDOWED ....

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS ....

....

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE .... (First) (Middle) (Maiden) (Last)

PLACE AND DATE OF MARRIAGE ....

HIS (OR HER) ADDRESS BEFORE MARRIAGE .... (St. and Number) (City) (State) (Country)

LIVING OR DECEASED .... DATE OF DECEASE .... CAUSE ....

PRESENT, OR LAST, ADDRESS .... (St. and Number) (City) (State) (Country)

DATE OF BIRTH .... PLACE OF BIRTH .... (City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY ....

CITIZENSHIP .... WHEN ACQUIRED? .... WHERE? .... (City) (State) (Country)

OCCUPATION .... LAST EMPLOYER ....

EMPLOYER'S OR BUSINESS ADDRESS .... (St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM .... (Date) TO .... (Date) BRANCH OF SERVICE ....

COUNTRY .... DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

....

16-45153-1

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents): none

1. NAME .... RELATIONSHIP .... AGE ....
CITIZENSHIP .... ADDRESS .... (St. and Number) (City) (State) (Country)

2. NAME .... RELATIONSHIP .... AGE ....
CITIZENSHIP .... ADDRESS .... (St. and Number) (City) (State) (Country)

3. NAME .... RELATIONSHIP .... AGE ....
CITIZENSHIP .... ADDRESS .... (St. and Number) (City) (State) (Country)

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME Samuel (First) Danford (Middle) Zehrung (Last)

LIVING OR DECEASED living DATE OF DECEASE .... CAUSE ....

PRESENT, OR LAST, ADDRESS San Rae Gardens, (St. and Number) Dayton 9, (City) Ohio (State) USA (Country)

DATE OF BIRTH 1/23/1892 PLACE OF BIRTH Roseville, (City) Ohio (State) USA (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY ....

CITIZENSHIP USA WHEN ACQUIRED? birth WHERE? .... (City) (State) (Country)

OCCUPATION Landscape Architect LAST EMPLOYER own employer - over 20 yrs.

EMPLOYER'S OR OWN BUSINESS ADDRESS San Rae Gardens, (St. and Number) Dayton 9, (City) Ohio (State) USA (Country)

MILITARY SERVICE FROM ---- (Date) TO ----- (Date) BRANCH OF SERVICE ....

COUNTRY .... DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

....

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME Hazel (First) Charlotte Jackson (Middle) Zehrung (Last)

LIVING OR DECEASED living DATE OF DECEASE .... CAUSE ....

PRESENT, OR LAST, ADDRESS San Rae Gardens, (St. and Number) Dayton 9, (City) Ohio (State) USA (Country)

DATE OF BIRTH 10/17/1896 PLACE OF BIRTH Montague, Michigan USA

CITIZENSHIP USA WHEN ACQUIRED? birth WHERE? .... (City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY ....

OCCUPATION housewife LAST EMPLOYER Detroit Board of Education 1927

EMPLOYER'S OR OWN BUSINESS ADDRESS (St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM ---- TO ---- BRANCH OF SERVICE

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME Nancy (First) (Middle) Zehrung (Last) AGE 21
   PRESENT ADDRESS Verity Hall, Middletown Hospital, Middletown, Ohio, USA (St. and Number) (City) (State) (Country) (Citizenship) USA
2. FULL NAME Dorothy (First) Jon (Middle) Zehrung (Last) AGE 17
   PRESENT ADDRESS San Rae Gardens, Dayton 9, Ohio USA (St. and Number) (City) (State) (Country) USA (Citizenship)
3. FULL NAME Mary (First) Elizabeth (Middle) Zehrung (Last) AGE 16
   PRESENT ADDRESS San Rae Gardens, Dayton 9, Ohio USA (St. and Number) (City) (State) (Country) USA (Citizenship)
4. FULL NAME (First) (Middle) (Last) AGE
   PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
5. FULL NAME (First) (Middle) (Last) AGE
   PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

FULL NAME (First) (Middle) (Last)

LIVING OR DECEASED DATE OF DECEASE CAUSE

PRESENT, OR LAST, ADDRESS (St. and Number) (City) (State) (Country)

DATE OF BIRTH PLACE OF BIRTH

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY

CITIZENSHIP WHEN ACQUIRED? WHERE? (City) (State) (Country)

OCCUPATION LAST EMPLOYER

14-00000

SEC. 9. MOTHER-IN-LAW

FULL NAME .... (First) .... (Middle) .... (Last)

LIVING OR DECEASED .... DATE OF DECEASE .... CAUSE ....

PRESENT, OR LAST, ADDRESS .... (St. and Number) (City) (State) (Country)

DATE OF BIRTH .... PLACE OF BIRTH ....

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY ....

CITIZENSHIP .... WHEN ACQUIRED? .... WHERE? .... (City) (State) (Country)

OCCUPATION .... LAST EMPLOYER ....

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

1. NAME Col. Paul Zehrung RELATIONSHIP cousin AGE 38

   CITIZENSHIP USA ADDRESS HI USA FE, APO 633 %Post Master N.Y., N.Y. (St. and Number) (City) (State) (Country)

2. NAME distant relatives in Sweden RELATIONSHIP .... AGE ....

   Grandparents on Mother's side came from Sweden

   CITIZENSHIP .... ADDRESS .... (St. and Number) (City) (State) (Country)

3. NAME .... RELATIONSHIP .... AGE ....

   CITIZENSHIP .... ADDRESS .... (St. and Number) (City) (State) (Country)

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

1. NAME Col. Paul Zehrung RELATIONSHIP cousin AGE 38

   CITIZENSHIP USA ADDRESS HI USA FE, APO 633 %Post Master, N.Y., N.Y. (St. and Number) (City) (State) (Country)

   TYPE AND LOCATION OF SERVICE (IF KNOWN) Director of Maintenance HI USA FE

2. NAME Major Jack Macklin RELATIONSHIP cousin AGE 31

   CITIZENSHIP USA ADDRESS Washington, D. C. USA (St. and Number) (City) (State) (Country)

   TYPE AND LOCATION OF SERVICE (IF KNOWN) Pentagon, Washington, D. C.

3. NAME Mrs. Elsie Dickert RELATIONSHIP Aunt AGE 55

   CITIZENSHIP USA ADDRESS 314 N 29th St. Billings, Mont. USA (St. and Number) (City) (State) (Country)

   TYPE AND LOCATION OF SERVICE (IF KNOWN) Social work - Dept. of Interior located in Montana

10 42455 1

SEC. 12. POSITION DATA

A. KIND OF POSITION APPLIED FOR Administrative position with Latin America, Economist, Statistician, or temporarily as a Stenographer

B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? $ 3,100
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)

C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY X

FREQUENTLY ______, CONSTANTLY ______

D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C. X

ANYWHERE IN THE UNITED STATES ______, OUTSIDE THE UNITED STATES X

E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:

SEC. 13. EDUCATION

ELEMENTARY SCHOOL West Carrollton ADDRESS West Carrollton (City), O. (State) USA (Country)

DATES ATTENDED 1933 - 1944 GRADUATE? yes

HIGH SCHOOL Oakwood High School ADDRESS Dayton 9 (City), Ohio (State) USA (Country)

DATES ATTENDED 1944 - 1946 GRADUATE? yes

COLLEGE Syracuse University ADDRESS Syracuse (City), New York (State) USA (Country)

MAJOR AND SPECIALTY Economics & Spanish YEARS COMPLETED 4

DATES ATTENDED 1946 - 1950 DEGREE BA

COLLEGE Universidad de San Carlos ADDRESS Guatemala City (City), (State) Guatemala C.A. (Country)

MAJOR AND SPECIALTY Spanish YEARS COMPLETED 5 credits

DATES ATTENDED summer 1948 DEGREE none given

CHIEF UNDERGRADUATE COLLEGE SUBJECTS economics - statistics

Spanish ~~grammar and~~ literature

CHIEF GRADUATE COLLEGE SUBJECTS ______

14-00000

SEC. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE none

(Country) (Service) (Rank) (Dates of Service)

(Last Station) (Serial Number) (Type of Discharge)

REMARKS:

SELECTIVE SERVICE BOARD NUMBER .... **ADDRESS**

IF DEFERRED GIVE REASON

INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS

SEC. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)

FROM 4/51 TO .... CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) 3

EMPLOYING FIRM OR AGENCY Board of Geographic Names

ADDRESS Interior Bldg. C & 18th Sts., N. W. Washington, D. C. USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS .... NAME OF SUPERVISOR Mrs. Mildred Moorman

TITLE OF JOB Statistical Draftsman SALARY $ 2,650 PER yr.

YOUR DUTIES drawing diacritics, drafting, typing

REASONS FOR LEAVING better position more in my interests

FROM 5/50 TO 4/51 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY San Mar Gardens, Inc.

ADDRESS Box 240 Dayton 9, R. R. 11 Ohio USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS nursery NAME OF SUPERVISOR Ray McKechnie

TITLE OF JOB clerk SALARY $ 1.10 PER hr.

YOUR DUTIES bookkeeping, typing, clerking, making financial reports, ordering wholesale, making floral arrangements

REASONS FOR LEAVING to take a job more in line with my training

15-62556-1

FROM 2/50 TO 5/50 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY National Peanut Council

ADDRESS 1111 Dupont Circle Building, Washington, D. C. USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Trade Assoc. NAME OF SUPERVISOR Mr. William F. Seals

TITLE OF JOB Asst. Bookkeeper SALARY $ 200 PER mo.

YOUR DUTIES bookkeeping, filing, general office work, financial reports

REASONS FOR LEAVING return home to help my father in his business

FROM 6/47 TO 8/47 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY Frigidaire, General Motors

ADDRESS Plant # 2 Dayton 9, Ohio USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS manuf. NAME OF SUPERVISOR Mr. Herbert Halderman

TITLE OF JOB SALARY $ PER

YOUR DUTIES office work in the chemical laboratories
work in the factory proper

REASONS FOR LEAVING return to college

FROM 4-48 TO 5-48 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY Grants 5/10 Store

ADDRESS Syracuse, New York USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS store NAME OF SUPERVISOR

TITLE OF JOB clerk SALARY $ PER

YOUR DUTIES waited on customers in the flower department

REASONS FOR LEAVING just a part-time temporary position for Easter

16—62866-1

SEC. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

NO

SEC. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Spanish SPEAK fluent READ fluent WRITE fluent

LANGUAGE French SPEAK slight READ fair WRITE fair

LANGUAGE .... SPEAK .... READ .... WRITE ....

B. LIST ALL SPORTS AND HOBBIES WHICH INTEREST YOU; INDICATE DEGREE OF PROFICIENCY IN EACH:

Art-drawing, painting, crafts, studied at school - good
Swimming, good; Reading; Knitting, good; Basketball, fair;
tennis, fair

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

I have spent a summer in Guatemala, living with a Guatemalan family, learning the life and ways of a Spanish family and city. I have quite a complete knowledge of the florist business from helping my father over a period of about 8 years.

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

calculator

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 60 SHORTHAND 70

16—62543-1

14-00000

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC. NO

IF YES, INDICATE KIND OF LICENSE AND STATE ....

FIRST LIC. OR CERTIFICATE (YR) .... LATEST LIC. OR CERTIFICATE (YR) ....

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:
(1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
(2) YOUR PATENTS OR INVENTIONS
(3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE.
(4) HONORS AND FELLOWSHIPS RECEIVED

3-I did a lot of extempt and declamation work in public speaking contests in high school. I am a member of the National Forensic League.

4-I received a partial scholarship from Chapel at Syracuse University

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

NO

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLOMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

NO

SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)

		Street and Number	City	State
1. Mr. John Lewis	BUS. ADD.	Oakwood High School,	Dayton,	Ohio
	RES. ADD.	NA		
2. Mr. Herbert Holderman	BUS. ADD.	Frigidaire, Plant 2,	Dayton 9,	Ohio
	RES. ADD.	11 Winding Way,	Dayton 9,	Ohio
3. Mr. Albert F. Kuhl, M.D.	BUS. ADD.	Harries Bldg.	Dayton	Ohio
	RES. ADD.	NA		
4. Mr. George Pohlmeyer	BUS. ADD.	NA		
	RES. ADD.	96 Winding Way,	Dayton,	Ohio
5. Miss Katherine Smith	BUS. ADD.	NA		
	RES. ADD.	59 Wiltshire	Dayton 9,	Ohio

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

		Street and Number	City	State
1. Miss Theadosia Moran	BUS. ADD.	NA		
	RES. ADD.	R. R. 2	Cazanovia	N. Y.
2. Mrs. Ed Eastin	BUS. ADD.	San Rae Gardens	Dayton 9,	Ohio
	RES. ADD.	Pease Ave.,	West Carrollton,	Ohio
3. Miss Betty Hollis	BUS. ADD.	Arlington Annex,	Arlington,	Va.
	RES. ADD.	1401-16th St., N. W.	Washington	DC
4. Mr. Harry Schwartz	BUS. ADD.	Univ. of Syracuse,	Syracuse,	N.Y.
	RES. ADD.	NA		
5. Mr. Walter Bohm	BUS. ADD.	Winter's National bank,	Dayton,	O.
	RES. ADD.	259 Greenmont blvd.	Dayton 9,	O.

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

		Street and Number	City	State
1. Mr. Ray F. McKechnie	BUS. ADD.	San Rae Gardens,	Dayton 9,	Ohio
	RES. ADD.	same		R. R. 11
school neighbors { 2. Miss Sheila Dewey	BUS. ADD.	NA		
	RES. ADD.	Box 303	Spencer,	N. Y.
3. Miss Marilyn Morris	BUS. ADD.	NA		
	RES. ADD.	811 Abbott St.,	Highland Park	N.J.

SEC. 21. FINANCIAL BACKGROUND

A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? yes IF NOT, STATE SOURCES OF OTHER INCOME

B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS
West Carrollton Bank-West Carrollton, Ohio
Washington Loan and Trust Co., Washington, D. C.

16—63533-1

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? no
GIVE PARTICULARS, INCLUDING COURT:

D. GIVE THREE CREDIT REFERENCES—IN THE U. S.

1. NAME Meredian Hill Hotel ADDRESS 2601-16th St. NW Washington DC (St. and Number) (City) (State)
2. NAME Mrs. Blick ADDRESS 1401-16th St. NW Washington DC (St. and Number) (City) (State)
3. NAME Delta Gamma Sorority ADDRESS 901 Walnut Ave., Syracuse NY. (St. and Number) (City) (State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS

FROM	TO	(St. and number) (City) (State) (Country)
4-1-51	Present	1401-16th St., N.W. Washington, D.C. USA
5-50	4-51	San Rae Gardens, Dayton 9, Ohio USA
2-50	5-50	2601-16th St., NW Washington, D.C. USA
9-48	2-50	901 Walnut Ave., Syracuse, N. Y. USA
9-46	9-48	two cottages of Syracuse Univ, Syracuse USA
7-48	8-48	9 C.P. # 30 Guatemala City, Guatemala
time before this		San Rae Gardens, Dayton 9, Ohio USA

SEC. 23. RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

FROM	TO	(City or section)	(Country)	(Purpose)
A. 7-46	---	Mexico City	Mexico	tourist
7-48	8-48	Guatemala City	Guatemala	student

SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

1. Delta Gamma - Rho 901 Walnut Ave., Syracuse, N. Y. USA (Name and Chapter) (St. and Number) (City) (State) (Country)
   DATES OF MEMBERSHIP: 1947-50 active - 1950 to present inactive
2. Spanish Club Syracuse Univ., Syracuse, N. Y. USA (Name and Chapter) (St. and Number) (City) (State) (Country)
   DATES OF MEMBERSHIP: 1947 - 8 - 9
3. Economics Club Syracuse Univ., Syracuse, N. Y. USA (Name and Chapter) (St. and Number) (City) (State) (Country)
   DATES OF MEMBERSHIP: 1948 - 9 - 50
4. Westminster Presbyterian Church - Dayton 9, Ohio USA
5. Brownies - Grade School - West Carrollton, Ohio USA

14-00000

10\. Girl Scouts - High School - West Carrollton, Ohio USA

11\. Hommadon [illegible] - Westminster Presbyterian Church - Dayton 9, O. USA
1943-4

12\. Alumni Association of Syracuse Univ, Syracuse, N. Y. USA
1950-

4\. International Relations Club - Syracuse Univ, Syracuse N.Y. USA
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1946-7-8-9

5\. 2nd & 1st Cabinet - Chapel - Syracuse Univ., Syracuse, N.Y. USA
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1948-9

6\. National Forensic League - Oakwood High School, Dayton 9, O. USA
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1945-6 active

7\. Sigma Theta Phi - Dayton 9, Ohio USA high school sorority
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1945-6

SEC. 25. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

NO

IF "YES," EXPLAIN:

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? YES IF SO, TO WHAT EXTENT?
an occasional drink at dinners and parties

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

NO

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

NO

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

NPA & DPA; Atomic Energy Commission; Council of Economic Advisors; Board of Geographic Names

16-60650-1

F. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

Board of Geographic Names 4-1-51

SEC. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Samuel D. Zehrung RELATIONSHIP father

ADDRESS San Rae Gardens, R. R. 11 Dayton 9, Ohio USA
(St. and Number) (City) (State) (Country)

SEC. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

NO

SEC. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Washington, D. C. DATE May 25, 1951
(City and State)

Betty L. Hollis (Witness) — Charlotte L. Zehrung (Signature of Applicant)

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

U. S. GOVERNMENT PRINTING OFFICE 16-62353-1

Soc. 11 - Mr. Jim Zohrung, Sr. Uncle 61

USA 1210 Wilson Dr., Dayton, Ohio USA

Mechanical Engineer - Wright Air Field,

Dayton, Ohio

14-00000

CONFIDENTIAL

SECURITY APPROVAL

Date: 16 Oct. 1951

TO: Chief, Covert Personnel Division

Your Reference: L2419

FROM: Chief, Security Division

Case Number: 56840

SUBJECT: ZEHRUNG, Charlotte Louise

1. This is to advise you of security action in the subject case as indicated below:

[X] Security approval is granted the subject person for access to classified information.

[ ] Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.

[ ] The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H of Regulation 10-9.

2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.

3. Subject is to be polygraphed as part of the EOD procedures.

Pool not. 10/18

m-l 25 Oct 10

Br. not. 10/18

C. V. Broadley
C. V. BROADLEY

CONFIDENTIAL

FORM NO. 38-101

14-00000

7DT-73

CONFIDENTIAL

INTEROFFICE MEMORANDUM

Date: 4 August 1951

TO: Chief, Covert Personnel Division

FROM: Chief, Security Division

SUBJECT: ZEHRUNG, Charlotte Louise 56840

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position:

2. This is to advise you of the following security action:

a. [X] Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity: D Street Pool

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

b. [ ] Name-checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested Limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. [ ] Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.

B. Notified 8 Aug

C. V. Broadley
C. V. BROADLEY

CONFIDENTIAL

FORM NO. 30-106
JUL 1951

14-00000

DEPARTMENT
OF
INTERIOR

UNITED STATES [illegible]RTMENT OF THE INTERIOR
DIVISION OF PERSO[illegible] [illegible]PERVISION AND MANAGEMENT
WASHINGTON, D. C.

Date of Action

Journal

Re: Miss Charlotte L. Zehrung
San Rae Gardens, R.R. 11
Dayton 9, Ohio

INDEFINITE APPOINTMENT

Effective Date: April 2, 1951 (Vice Vacancy)

	From	To
Position		Statistical Draftsman
Grade and Salary		GS-5, $2650.00 per annum (GS-1533-3-504)
Bureau		Office of the Secretary
Branch		Division of Geography
Headquarters		Washington, D. C.
Departmental or Field		Departmental

G. I. - Martha E. Reid

This appointment is subject to a trial period of one year.

Subject to investigation.

Under this appointment you will be covered by the National Social Security System.

(Sgd) THOMAS H. TELLIER

Chief, Administrative Branch

Personnel Officer
Signed [illegible]
Office of the Secretary

Appropriation Title: [illegible] Working Fund, Interior, Board on Geographic Names, Sundry, 1951.

JUSTIFICATION (Confine justification to essential reasons for the action recommended)

Miss Zehrung has been selected for appointment from Civil Service Certificate N-2580.

Her Civil Service papers, medical certificate, and Form 85 for preappointment loyalty check are attached.

Attachments.

Social Security No. 269-24-3138

Permanent
CIVIL SERVICE OR OTHER LEGAL AUTHORITY
CS Certificate No. N-2580 dated 1/16/51.
C.S. Reg. 2.115

Appropriation
Regular

Date of Birth	Legal Residence
1/12/29	Ohio
Sex: F	Race: W

VETERANS PREFERENCE
Yes ___ No X

LAST STATUS CHANGE OR APPOINTMENT
From
To
Effective
Last Eff. Rating

NATURE OF POSITION
Vice X Add. Identical ___
Name Martha E. Reid
GS-1633-3-504

SUBJECT TO RETIREMENT
Yes ___ No X

DATE THIS ACTION INITIATED
2/14/51

ADMINISTRATIVE AUTHORITY FOR ACTION
Recommended by Officers

Personnel
Organization
Budget
Finance
Security
ALLOCATION APPROVAL

BUREAU NOTIFICATION COPY

STANDARD FORM 50 (7 PART)
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

UNITED STATES
[DEPA]RTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—FIRST—MIDDLE INITIAL—LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION No.	4. DATE
Miss Charlotte L. Zehrung	1/12/29		

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Separation (To accept Excepted Appt. with Central Intelligence Agency)	8/26/51	

FROM		TO
Statistical Draftsman (CS-1853-3-603)	8. POSITION TITLE	
CS-3, $2650.00 per annum	9. SERVICE, GRADE, SALARY	
Office of the Secretary Division of Geography Research Branch	10. ORGANIZATIONAL DESIGNATIONS	
Washington, D. C.	11. HEADQUARTERS	
FIELD [ ] DEPARTMENTAL [X]	12. FIELD OR DEPT'L	FIELD [ ] DEPARTMENTAL [ ]

13. REMARKS

Any leave remaining to your credit will be transferred.

Separated without reemployment rights.

Thomas H. Tallier, Personnel Officer
14. SIGNATURE OR OTHER AUTHENTICATION

15. VETERAN'S PREFERENCE: NONE [X] | 5 PT | 10 POINT (DISAB. / WIFE / WIDOW) | WAIT | AWI | STAT

16. POSITION CLASSIFICATION ACTION: NEW | VICE | I.A. | REAL

17. SEX: F | 18. RACE

19. APPROPRIATION: 1423901.033 Working Fund, Interior, Office of the Secretary, 1952
FROM
TO

20. SUBJECT TO C.S. RETIREMENT ACT (YES—NO): No

21. DATE OF OATH (ACCESSIONS ONLY)

22. LEGAL RESIDENCE: Ohio (claimed)

U.S. GOVERNMENT PRINTING OFFICE

4. PERSONNEL FOLDER COPY

14-00000

Give this card to the
APPOINTMENT CLERK
at the
PHS OUTPATIENT CLINIC
4th and C Streets SW.
EX 6300 Ext. 6228
(or Code 116)

323718.

1. FIRST: Charlotte | INITIAL: L. | LAST NAME: Zehrung

2. POSITION TITLE: Statistical Draftsman

3. DATE OF BIRTH 1/29/29 HAS AN APPOINTMENT ON ______ (Date) AT ______ (Time) A.M. P.M.

AT THE SERVICE CHECKED BELOW.

4 ☐ PHOTOFLUOROGRAM	8. ☐ OB-GYN	12 ☐ RADIOLOGY	16. ☐ NUTRITION
5 ☐ MEDICAL EXAMINATION	9 ☐ PHYS MED.	13 ☐ [illegible]	17. ☐ MENTAL HEALTH
6 ☐ LABORATORY	10 ☐ SURGICAL	14. ☐ DENTAL	18. ☐ DERMATOLOGY
7. ☐ MEDICAL	11 ☐ PEDIATRIC	15. ☐ ENT.	

19. ☐ OTHER (Specify)

20. CLINIC REGISTER NO | 21. NAME OF DOCTOR

STANDARD FORM [illegible] JULY 1 47
[illegible]
F. P. M. CHAPTER [illegible]

MEDICAL APPOINTMENT AND REPORT

2 [illegible]

STANDARD FORM 61 (REVISED APRIL 1, 1950)
PROMULGATED BY CIVIL SERVICE COMMISSION
CHAPTER A1 FEDERAL PERSONNEL MANUAL

APPOINTMENT AFFIDAVITS

IMPORTANT.--*Before swearing to these appointment affidavits, you should read and understand the attached information for appointee*

Interior (Department or agency) Office of Secretary Geography (Bureau or division) Washington D.C. (Place of employment)

I, Charlotte L. Zehring, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers contained in my Application for Federal Employment, Form No. 57, dated February, 1950, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

Charlotte L. Zehring
(Signature of Appointee)

Subscribed and sworn before me this 2 day of April, A. D. 1951

at Washington (City) D.C. (State)

Notid

[SEAL] act of June 26, 1943 Sec. 206

Ethel S. Covell (Signature of officer)

Clerk, Division of Geography (Title)

NOTE.—*If the oath is taken before a Notary Public the date of expiration of his commission should be shown.*

16—63140-1

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. *Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below.* Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (*street and number, city and State*)
1401 16th St., N.W. Washington D.C.

2. (A) DATE OF BIRTH: 1/12/29
(B) PLACE OF BIRTH (*city or town and State or country*): Dayton, O. U.S.A.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY: Samuel D. Zehrung
(B) RELATIONSHIP: Father
(C) STREET AND NUMBER, CITY AND STATE: Sun Ree Gardens - RR 11 Dayton, O.
(D) TELEPHONE NO.: WA 5831

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☒ NO
If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (*Give street number, if any*)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATION-SHIP	MAR-RIED (*Check one*)	SINGLE
		1. 2. 3.			
		1. 2. 3.			
		1. 2. 3.			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X	
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? *If your answer is "Yes", give details in Item 10.*		X
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? *If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service, amount of retirement pay, and under what retirement act, and rating, if retired from military or naval service.*		X
8. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? *If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.*		X
9. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED, OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF $25 OR LESS WAS IMPOSED)? *If your answer is "Yes", list all such cases under Item 10. Give in each case (1) The date, (2) the nature of the offense or violation; (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed your fingerprints will be taken*		X

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

ITEM NO.	WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that the appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) *Identity of appointee.*—The appointee's signature and handwriting are to be compared with the application and/or other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) *Age.*—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) *Citizenship.*—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Form 61 constitutes an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) *Members of Family.*—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointment in the competitive service, no other member of such family is eligible for probational or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members-of-family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

U. S. GOVERNMENT PRINTING OFFICE 16—58160-1

14-00000

5-209

UNITED STATES [illegible] TMENT OF THE INTERIOR
DIVISION OF PERSO[illegible] SUPERVISION AND MANAGEMENT
WASHINGTON, D. C.

Date of Action

Journal

Re: Miss Charlotte L. Kehrung
San Rae Gardens, R.R. 11
Dayton 9, Ohio

INDEFINITE APPOINTMENT

Effective Date: [illegible]

	From	To
Position		Statistical Draftsman
Grade and Salary		GS-3, $2650.00 per annum (GS-1533-3-504)
Bureau		Office of the Secretary
Branch		Division of Geography Research Branch
Headquarters		Washington, D. C.
Departmental or Field		Departmental

O. I. - Martha E. Reid

This appointment is subject to a trial period of one year.

Subject to investigation.

Under this appointment you will be covered by the National Social Security System.

OFFICE OF PERSONNEL
[illegible]
FEB 15 1951

(SGD) THOMAS H. TELLIER

Signed [illegible]

Appropriation Title: 14X8965.001 Working Fund, Interior, Board on Geographic Names, Sundry, 1951.

JUSTIFICATION (Continue on reverse to explain reasons for the action recommended)

Miss Kehrung has been selected for appointment from Civil Service Certificate H-2580.

Her Civil Service papers, medical certificate, and Form 85 for pre-appointment loyalty check are attached.

Attachments.

14 [illegible] 3/5/51 Pre appt. loyalty check OK'd.

DEPARTMENTAL ACTION COPY

Permanent
CIVIL SERVICE OR OTHER LEGAL AUTHORITY
CS Certificate No. H-2580 dated 1/16/51. C.S. Reg. 2.115

Appropriation: Regular

Date of Birth	Legal Residence
1/12/29	Ohio
Sex	Race
F	W

VETERAN'S PREFERENCE
Yes ___ No X

LAST STATUS CHANGE OR APPOINTMENT
From
To
Effective
Last Eff cy Rating

NATURE OF POSITION
Vice X Add. Identical ___
Name Martha E. Reid
GS-1533-3-504
Reallocation ___ New ___

Other [illegible]
SUBJECT TO RETIREMENT
Yes ___ No X

DATE THIS ACTION INITIATED
2/14/51

ADMINISTRATIVE AUTHORITY FOR ACTION
Recommending Officers
[signatures]

Director of Personnel
Organization Survey
3/5 Recruitment Division [signature]
Training
Employee Services
Appointments
7/5 [illegible] Horford

ALLOCATION APPROVAL
GS-1533-3-504

STANDARD FORM 85
Promulgated August 4, 1947, by Civil Service Commission (Chapter I 2, F. P. M.)

REQUEST F[illegible] ORT OF LOYALTY DATA ON A[illegible] ANTS AND APPOINTEES

THIS FORM TO BE USED ONLY FOR APPLICANTS AND APPOINTEES WHOSE RECORD CHECKS AND INQUIRIES ARE CONDUCTED BY CIVIL SERVICE COMMISSION
(PART I—EXECUTIVE ORDER 9835)

CASE SERIAL NO. (CSC use only)

TO:

The following information is furnished for identification purposes on the person named below. Kindly furnish a report on any loyalty information contained in your files. (The fingerprints of this person are attached.)

1. FULL NAME (Initials and abridgments of full name are not acceptable).
(Surname) Zehrung (Given name) Charlotte (Middle or other names) Louise

2. ALIASES AND NICKNAMES: Sherri

3. DATE OF THIS REQUEST: 2/14/51

4. SPECIAL NUMBERS KNOWN TO REQUESTING AGENCY (FBI number or FBI file number, passport number, Army or Navy serial number, seaman's certificate of identification, alien registration number, Social Security number, etc. Specify which)

Social Security No. 069-24-3138

5. PLACE OF BIRTH: Dayton, Ohio

6. DATE OF BIRTH: Jan. 12, 1929

7. TITLE OF POSITION: Statistical Draftsman SENS (Division of Geography)

8. SEX: [ ] MALE [X] FEMALE

9. MARITAL STATUS: [X] SINGLE [ ] MARRIED

10. IF MARRIED, GIVE SPOUSE'S FULL NAME, AND DATE AND PLACE OF BIRTH: None

11. DATE OF APPOINTMENT: APPL

12. TYPE OF APPOINTMENT: [X] Probational (Cite Civil Service or other legal authority) [ ] EXCEPTED [ ] TEMPORARY Reg. 2.115

13. ORGANIZATIONS WITH WHICH AFFILIATED, OTHER THAN RELIGIOUS OR POLITICAL ORGANIZATIONS OR THOSE WHICH SHOW RELIGIOUS OR POLITICAL AFFILIATIONS

Delta Gamma Sorority

14. DATES AND PLACES OF RESIDENCE FOR THE LAST 10 YEARS

From	To	Street	City	State
9/41	9/46	San Ras Gardens R. R. 11	Dayton	Ohio
9/46	6/47	901 Walnut Ave.	Syracuse	N. Y.
6/47	9/47	San Ras Gardens	Dayton	Ohio
9/47	6/48	901 Walnut Ave.	Syracuse	N. Y.
7/48	8/48	30 Vevena Calle Poniente	Guatemala City	Guatemala C.A.
9/48	6/49	901 Walnut Ave.	Syracuse	N. Y.
6/49	9/49	San Ras Gardens	Dayton	Ohio
9/49	1/50	901 Walnut Ave.	Syracuse	N. Y.
2/50	5/50	2001 - 16th St., N. W.	Washington	D. C.
6/50	pres.	San Ras Gardens	Dayton	Ohio

15. DATES, NAMES AND ADDRESSES OF EMPLOYERS FOR THE LAST 10 YEARS

Date	Employer	Address
Unemployed prior to 6/47		
6/47 - 9/47	Frigidaire Plant #2	Dayton 9, Ohio
9/47 - 4/48	Unemployed	
4/48 - 5/48	Grants Dime Store (part-time)	Syracuse, N. Y.
5/48 - 6/49	Unemployed	
6/49 - 9/49	San Ras Gardens, R. R. 11	Dayton, Ohio
9/49 - 2/50	Unemployed	
2/50 - 5/50	National Peanut Council	1111 Dupont Circle Bldg., Washington, D. C.
5/50 - pres.	San Ras Gardens	Dayton, Ohio

16. THIS AGENCY HAS LOYALTY INFORMATION REPORT(S) FURNISHED BY THE AGENCIES INDICATED BELOW

AGENCY WHICH MADE THE LOYALTY REPORT	DATE OF REPORT	REMARKS
None		

17. THIS SPACE RESERVED FOR RETURN REPORT TO AGENCY WHERE DEROGATORY INFORMATION IS DEVELOPED

18. NAME AND ADDRESS OF REQUESTING AGENCY
Personnel Officer
Office of the Secretary
Department of the Interior
Washington 25, D. C.

SEE REVERSE FOR REPORT ON CASES WHERE DEROGATORY INFORMATION WAS DEVELOPED

16—19—48803-1

14-00000

UNITED STATES C[illegible] SERVICE COMMISSION
DIRECTOR
FOURTH U. S. CIVIL SERVICE REGION
TEMPORARY BUILDING "R"
3RD & JEFFERSON DRIVE, S. W.
WASHINGTON [illegible] D. C.

OFFICE OF [illegible]

MAR 15 1951

PREAPPOINTMENT LOYALTY CHECK

PRELIMINARY REPORT OF CLEARANCE ON INITIAL CHECKS

1. CASE SERIAL [illegible]: 4-51-[illegible] S[illegible]
2. DATE OF THIS REPORT: 3/14/51
3. PROPOSED ACTION: APPL

Personnel Officer
Office of the Sec'y
Dept. of the Interior
Wash. 25, D.C.

PERSONAL AND CONFIDENTIAL

4. COMPETITIVE
5. EXCEPTED: 4/7/51

6. NAME (Last, first, middle): Z[illegible], Charlotte Louise (Aka: Sherr[illegible])

7. DATE OF BIRTH: 1/12/29

8. PROPOSED POSITION, ORGANIZATIONAL DESIGNATION, AND PLACE OF EMPLOYMENT: Statistical Draftsman, Dept. of Int. Off. of Sec'y, [illegible]

Preappointment loyalty check has been made on the above applicant for a 'sensitive' position, pursuant to Chapter I2 of the Federal Personnel Manual. This check revealed no derogatory information regarding this person's loyalty.

No further papers are required if the proposed action is the *appointment of a person employed by another agency* and you have determined from the losing agency that the appointee or incumbent check has been completed.

For any other type of appointment action, please submit to this office within three working days after the appointee enters on duty (1) application, (2) file covering any investigation or inquiry conducted by your agency on a preappointment basis, and (3) Standard Form 87 (fingerprint chart) unless fingerprint search has already been made as shown by item 9A below.

9A. FINGERPRINT SEARCH HAS BEEN COMPLETED AS PART OF THE PREAPPOINTMENT LOYALTY CHECK.

XX B. FINGERPRINTS WERE NOT SUBMITTED AS PART OF THE PREAPPOINTMENT LOYALTY CHECK.

C. FINGERPRINTS WERE UNCLASSIFIABLE. YOU MAY EITHER (1) MAKE THE APPOINTMENT AT ONCE AND SUBMIT REPRINTS WITH THE OTHER REQUIRED PAPERS, OR (2) WITHHOLD APPOINTMENT AND SUBMIT REPRINTS SEPARATELY FOR COMPLETION OF FINGERPRINT SEARCH BEFORE YOU DECIDE WHETHER TO APPOINT.

UNCLASSIFIABLE FINGERPRINTS ☐ ARE ATTACHED.
☐ WILL BE FORWARDED ON RECEIPT FROM OUR CENTRAL OFFICE.

Please use the copy of this notice for your transmittal or reply. Space has been provided on the back for your convenience. *A reply is required*, even though it may not be necessary to transmit forms in this case.

[signature]
REGIONAL DIRECTOR

[illegible] Form 186
[illegible]

14-00000

TO: DIRECTOR, U. S. CIVIL SERVICE REGION

	1. Forms attached as requested. Proposed personnel action effected April 9, 1951
	2. Forms not submitted because proposed personnel action dropped from consideration.
	3. Forms not submitted because this is an appointment without break in service of a person who was employed by another agency and it has been determined from the Official Personnel Folder of the losing agency that the appointee or incumbent check has been completed.
	4. Reprints on Standard Form 87 attached. Decision regarding appointment will not be made until the results of the FBI fingerprint search have been received.

REMARKS:

Forms 57 and 87 attached.

DATE	SIGNATURE OF APPOINTING OFFICER	OFFICIAL TITLE
April 9, 1951	(SGD.) F. T. SMITH	Personnel Officer, ~~Office of the Secretary.~~ Dept. of Interior.

USCSC—WASHINGTON D.C.

14-00000

OPTIONAL FORM NO. 5
DECEMBER 1947
CIVIL SERVICE COMMISSION
(SUPERSEDES CSC FORM 1902)

INQUIRY AS TO AVAILABILITY

Return this form to →

AGENCY AND ADDRESS (Street, city, and State)
Miss Mathilda C. Heuser
Chief, Administrative Branch
Division of Geography
Dept. of the Interior
Washington 25, D.C.

Miss Charlotte L. Zehrung
San Rae Gardens, RR11
Dayton 9, Ohio

(Please correct address if different from above)

DATE	CERTIFICATE
Jan. 30, 1951	H-2580
POSITION	SALARY
Statistical Draftsman, GS-3	$2650 p.a.
LOCATION	
Washington, D. C.	

TYPE OF APPOINTMENT: Indefinite
☐ PROBATIONAL
☐ TEMPORARY FOR ....

This office is considering you among others for the employment described. Please fill out the "Availability Statement" below, indicating whether you would accept this position if offered, and return the entire sheet to this office. Appointment would be subject to the Civil Service requirements described on the back of this letter. Whether you are available or not, please reply within ....3.... days in order that one of those who are available may be selected as promptly as possible to fill the vacancy.

Failure to reply to this inquiry will result in the removal of your name from the register of eligibles until such time as you request restoration and furnish the information asked for in the statement below.

THIS IS A LETTER OF INQUIRY AND *NOT* AN OFFER OF EMPLOYMENT. *If selected, you will be notified and given further instructions.*

Other information:

Sincerely yours,

Mathilda C. Heuser

Chief, Admin. Branch

AVAILABILITY STATEMENT

(Check one)

☑ I am available and wish to be considered for the position described above. I can report for duty within 10 days after notification. I am now employed by San Rae Gardens at Dayton 9, Ohio RR11

☐ I do not wish to be considered for the position described above. *I am giving my reasons on the other side of this form.*

(Check one)

☐ I request that my name be removed from the active list of eligibles until I report that I am available for appointment.

☑ Consider me available for other appointments, subject to the following conditions:

The position must pay at least $ 2,650 per year (year, month, day, or hour).

I am willing to work: ☑ In Washington, D. C.; ☐ Anywhere in the U. S.; ☐ Outside the U. S.

I will accept appointment in the following locations only: ....

I will accept short-term appointment for: ☐ 1 to 3 months; ☐ 3 to 6 months; ☑ 6 to 12 months.

Feb - 2 - 1951 (Date)

Charlotte L. Zehrung (Signature)

16-61729-1

14-00000

STANDARD FORM 78
JULY 1949
FEDERAL PERSONNEL MANUAL CHAPTER M1

UNITED STATES CIVIL SERVICE COMMISSION
CERTIFICATE OF MEDICAL EXAMINATION

(Applicant must supply information below to heavy line)
(Typewrite, or Print in Ink)

1. MR. / MRS. / MISS (FIRST NAME) Charlotte (MIDDLE INITIAL) L. (LAST) Zehrung
2. DATE OF BIRTH: January 18, 1889
3. ☐ MALE ☒ FEMALE
4. ADDRESS: San ... , Dayton 3, Ohio
5. TITLE OF POSITION: Statistical Draftsman
6. DEPARTMENT OR BUREAU IN WHICH YOU ARE TO BE EMPLOYED: Interior - Office of the Secretary Division of Geography
7. LOCATION: Washington, D. C.
8. ARE YOU NOW EMPLOYED IN THE POSITION SHOWN IN ITEM 5? ☐ YES ☒ NO. IF YOUR ANSWER IS "YES," GIVE THE DATE OF YOUR ORIGINAL APPOINTMENT TO THIS POSITION:
9. (A) HAVE YOU ANY PHYSICAL DEFECT OR DISABILITY WHATSOEVER? ☐ YES ☒ NO. IF YOUR ANSWER IS "YES," GIVE DETAILS:

(B) DOES THE VETERANS ADMINISTRATION RECOGNIZE SERVICE-CONNECTED DISABILITY IN YOUR CASE? ☐ YES ☒ NO
(C) HAVE YOU EVER RECEIVED DISABILITY RETIREMENT FROM THE U. S. CIVIL SERVICE COMMISSION? ☐ YES ☒ NO

Sign your name in INK as it appears on your application in the presence of the physician for purpose of identification.

SIGNATURE OF APPLICANT: Charlotte L. Zehrung

DOCTOR: All questions on both sides of this certificate and on the lower half of the attached Health Qualification Placement Record must be answered. Before beginning the examination refer to items 9 and 10 on the Health Qualification Placement Record so that you will have knowledge of the physical requirements of the position to which the applicant is to be appointed. Sign both this certificate and the Health Qualification Placement Record.

1. HEIGHT: 5 FEET 8 INCHES WEIGHT ... POUNDS
2. EYES:
(A) DISTANT VISION (SNELLEN): WITHOUT GLASSES: RIGHT 20/.. LEFT 20/.. WITH GLASSES, IF WORN: RIGHT 20/25 LEFT 20/30
(B) WHAT IS THE LONGEST AND SHORTEST DISTANCE AT WHICH THE FOLLOWING SPECIMEN OF JAEGER NO. 2 TYPE CAN BE READ BY THE APPLICANT? TEST EACH EYE SEPARATELY.

employees in the Federal classified service as may be requested by the Civil Service Commission or its authorized representative. This order will supplement the Executive Orders of May 29 and June 18, 1923 (Executive Order, September 4, 1924).

	WITHOUT GLASSES:	WITH GLASSES, IF USED:
R.	.. IN. TO 22 IN.	.. IN. TO 28 IN.
L.	.. IN. TO 22 IN.	7 IN. TO 22 IN.

(C) EVIDENCE OF DISEASE OR INJURY: RIGHT ... LEFT ...
(D) COLOR VISION: IS COLOR VISION NORMAL WHEN ISHIHARA OR OTHER COLOR PLATE TEST IS USED? ☐ YES ☐ NO
IF NOT, CAN APPLICANT PASS LANTERN, YARN OR OTHER COMPARABLE TEST? ☐ YES ☐ NO

3. EARS: (CONSIDER DENOMINATORS INDICATED HERE AS NORMAL. RECORD AS NUMERATORS THE GREATEST DISTANCE HEARD) ORDINARY CONVERSATION: RIGHT EAR 20/20 FT. LEFT EAR 20/20 FT. EVIDENCE OF DISEASE OR INJURY: RIGHT EAR ... LEFT EAR ...

4. NOSE	5. PARA NASAL SINUSES	6. MOUTH AND THROAT
normal	normal	normal.

7. GASTRO-INTESTINAL: normal
(A) HISTORY OF PEPTIC ULCER: ☐ YES ☒ NO. IF "YES," IS ULCER: ☐ ACTIVE ☐ QUIESCENT ☐ HEALED
HOW LONG? ... DATE OF LAST X-RAY ...
SYMPTOMS PRESENT, IF ANY (Severity, frequency, etc.):
TREATMENT (Use space under "Remarks" if needed):

8. METABOLIC DISORDERS (INDICATE ANY ABNORMALITY OF THE FOLLOWING GLANDS BY A CHECK IN THE APPROPRIATE BOX, AND EXPLAIN UNDER "REMARKS."):
☐ THYROID ☐ PANCREAS ☐ PITUITARY ☐ OVARIAN

16—25001-1

9. HEART AND BLOOD VESSELS normal

(A) BLOOD PRESSURE: MM. HG SYSTOLIC 12[illegible] DIASTOLIC 7[illegible]

(B) IS ORGANIC HEART DISEASE PRESENT? ☐ YES ☒ NO

(C) IF ORGANIC HEART DISEASE IS PRESENT, IS IT FULLY COMPENSATED? ☐ YES ☐ NO

(D) PULSE RATE. SITTING [illegible] IMMEDIATELY AFTER EXERCISE (UNLESS CONTRAINDICATED) [illegible]
TWO MINUTES AFTER EXERCISE [illegible] CARDIAC RESERVE Good (GOOD, FAIR, OR POOR)

10. LUNGS:
RIGHT normal LEFT normal

HISTORY OF TUBERCULOSIS? ☐ YES ☒ NO. IF "YES," HOW LONG HAS THE DISEASE BEEN ARRESTED?

IF THERE IS HISTORY OF TUBERCULOSIS, IS ANY TYPE OF COLLAPSE THERAPY BEING RECEIVED AT PRESENT? ☐ YES ☐ NO. IF "YES," GIVE FULL DETAILS UNDER "REMARKS." IS MEDICAL SUPERVISION NECESSARY? ☐ YES ☐ NO
(IF X-RAY IS MADE, GIVE REPORT UNDER "REMARKS.")

11. HERNIA: ☐ YES ☒ NO. IF "YES," NAME VARIETY: INGUINAL, VENTRAL, FEMORAL, POST-OPERATIVE, ETC.:
IF PRESENT, IS IT SUPPORTED BY A WELL-FITTING TRUSS? ☐ YES ☐ NO

12. VARICOSE VEINS: ☐ YES ☒ NO. IF "YES," STATE LOCATION AND DEGREE

13. FEET: IS FLAT FOOT PRESENT? ☐ YES ☒ NO. IF "YES," STATE DEGREE OF IMPAIRMENT OF FUNCTION (NONE, SLIGHT, MODERATE, SEVERE)

14. DEFORMITIES, ATROPHIES, AND OTHER ABNORMALITIES, DISEASE NOT INCLUDED ABOVE
None

15. SCARS OF SERIOUS INJURY OR DISEASE None

16. NERVOUS SYSTEM: (A) INCLUDE SYMPTOMS AND FULL HISTORY OF ANY MENTAL, NERVOUS, OR EMOTIONAL ABNORMALITY (USE ADDITIONAL SHEETS IF NECESSARY): none

(B) HAS APPLICANT EVER BEEN HOSPITALIZED OR TREATED FOR A MENTAL ILLNESS? ☐ YES ☒ NO

(C) WHERE (NAME AND LOCATION OF HOSPITAL):

(D) DATE OR DATES OF HOSPITALIZATION:

(E) DESCRIBE ANY RESIDUALS OF PREVIOUS MENTAL OR NERVOUS ILLNESS:

(F) ANY HISTORY OF EPILEPSY OR FAINTING SPELLS? ☐ YES ☒ NO. IF SO, GIVE DETAILS UNDER "REMARKS" BELOW

17. EVIDENCE OR HISTORY OF VENEREAL DISEASE. IF BLOOD SEROLOGY OR OTHER LABORATORY EXAMINATIONS ARE MADE, GIVE DETAILS UNDER "REMARKS."
None.

18. URINALYSIS (IF INDICATED):
SP. GR. ____ ALBUMEN ____ SUGAR ____
CASTS ____ BLOOD ____ PUS ____

I HAVE FOUND THE APPLICANT ABNORMAL UNDER THE FOLLOWING HEADINGS:

REMARKS:
Good physical condition. Normal state of health.

19. SIGNATURE OF PHYSICIAN OR EXAMINER	NAME TYPED OR PRINTED	DATE
Albert F. Kuhl	Albert F. Kuhl, M.D.	2/8/51

20. ADDRESS OF EXAMINING PHYSICIAN (Typed or printed)	21. DO YOU HAVE FEDERAL DESIGNATION? ☐ YES ☒ NO IF YES, SPECIFY
916 Harries Bldg. Dayton 2, Ohio	☐ FULL TIME ☐ PART TIME ☐ FEE BASIS

GPO [illegible]

HEALTH QUALIFICATION PLACEMENT RECORD

(This section is comparable to Standard Form 90 promulgated March 1945 by Bureau of the Budget Circular A-24)

1. MR. MRS. MISS (FIRST NAME) (MIDDLE INITIAL) (LAST) Charlotte L. [illegible]	2. DATE OF BIRTH January 18, 1929	3. ☐ MALE ☒ FEMALE
4. ADDRESS [illegible] Gardens, Dayton 9, Ohio	5. TITLE OF POSITION Statistical Draftsman	
6. DEPARTMENT OR BUREAU IN WHICH YOU ARE TO BE EMPLOYED Office of the Secretary Interior - Division of Geography	7. LOCATION Washington, D. C.	

8. ARE YOU NOW EMPLOYED IN THE POSITION SHOWN IN ITEM 5? ☐ YES ☒ NO. IF YOUR ANSWER IS "YES," GIVE THE DATE OF YOUR ORIGINAL APPOINTMENT TO THIS POSITION:

TO BE COMPLETED BY APPOINTING OFFICER: Sections 9 and 10

(A) BRIEF OUTLINE OF WHAT WORKER DOES	(B) PHYSICAL DEMANDS OF THE POSITION
For the physician's use, set down in brief and simple terms what the employee does on this job, including environmental details such as stairs to climb, distance to rest-room facilities, cafeteria, work-shift, etc. (*Use Section 9 below.*)	In Section 10 below encircle the number of those factors which are essential to the duties of the position for which this applicant is being considered. The blank spaces may be used for special factors not listed.

9. TITLE OF POSITION AND OUTLINE OF WHAT WORKER DOES IN THIS POSITION (*Advise use of dictionary of occupational titles as guide, as applicable*)

Statistical Draftsman - To assist in the performance of drafting, lettering and incidental statistical clerical work in the preparation and revision of index maps, showing the location of approved and disapproved names and the extent of features to which names apply; charts, graphs and other illustrative materials in connection with the functions of the Research Branch and for administrative purposes.

TO BE COMPLETED BY EXAMINING PHYSICIAN: Sections 10, 11, 12, 13, 14, and 15

INSTRUCTIONS: The items circled below indicate the physical requirements of the position for which this individual is being considered. Indicate the individual's physical capacities for this position by placing an X in the appropriate column opposite the numbers encircled. If the individual has any other physical limitations relating to physical requirements not encircled or not covered by this form, indicate these under "Remarks" on the reverse side. Whenever PARTIAL capacity has been indicated, explain under "Remarks," giving specific quantities.

10. PHYSICAL REQUIREMENTS

ENVIRONMENTAL FACTORS

	CAPACITY: FULL	PARTIAL	NONE		CAPACITY: FULL	PARTIAL	NONE
1. OUTSIDE				18. WORKING AROUND MACHINERY WITH MOVING PARTS			
2. OUTSIDE AND INSIDE				19. MOVING OBJECTS OR VEHICLES			
3. EXCESSIVE HEAT				20. WORKING ON LADDERS OR SCAFFOLDING			
4. EXCESSIVE COLD				21. WORKING BELOW GROUND			
5. EXCESSIVE HUMIDITY				22. UNUSUAL FATIGUE FACTORS (*Specify*)			
6. EXCESSIVE DAMPNESS OR CHILLING							
7. DRY ATMOSPHERIC CONDITIONS				23. WORKING WITH HANDS IN WATER			
8. EXCESSIVE NOISE, INTERMITTENT				24. EXPLOSIVES			
9. CONSTANT NOISE				25. VIBRATION			
10. DUST				26. WORKING CLOSELY WITH OTHERS			
11. SILICA, ASBESTOS, ETC.				27. WORKS ALONE			
12. FUMES, SMOKE, OR GASES				28. PROTRACTED OR IRREGULAR HOURS OF WORK			
13. SOLVENTS (*Degreasing agents*)				29. SPECIAL FACTORS (*Specify*)			
14. GREASES AND OILS							
15. RADIANT ENERGY				30.			
16. ELECTRICAL ENERGY				31.			
17. SLIPPERY OR UNEVEN WALKING SURFACES				32.			

16—[illegible]

14-00000

STANDARD FORM 57—NOV 1947
U.S. CIVIL SERVICE COMMISSION

APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS. In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type-write or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

ANNOUNCEMENT U 180   APPLICATION NO 306603

1 NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR: Statistical Draftsman

2 OPTION(S) (if mentioned in examination announcement)

3 PLACE OF EMPLOYMENT APPLIED FOR (City and State): Washington, D.C.

4 DATE OF THIS APPLICATION: Feb. 16, 1950

5 MR. MRS. MISS (First name) (Middle) (Maiden, if any) (Last): Charlotte Louise Zehrung

6 (A) STREET AND NUMBER OR R. D. NUMBER: San Roc Gardens RR 11

(B) CITY OR POST OFFICE (including postal zone) AND STATE: Dayton 9, Ohio

7 LEGAL OR VOTING RESIDENCE (State): Ohio

8 (A) OFFICE PHONE   (B) HOME PHONE

9 DATE OF BIRTH (month, day, year): January 12, 1929

10. ☐ MARRIED ☒ SINGLE

11 PLACE OF BIRTH (city and State; if born outside U.S., name city and country): Dayton, Ohio

12 ☐ MALE ☒ FEMALE

13 (A) HEIGHT WITHOUT SHOES: 5 FEET 8 INCHES   (B) WEIGHT: 132 POUNDS

14 (A) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? ☐ YES ☒ NO

(B) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE

DO NOT WRITE IN THIS BLOCK
For Use of Civil Service Commission Only

☐ APPOR ☐ NON APPOR

MATERIAL: ☐ SUBMITTED ☐ RETURNED

ENTERED REGISTER:

NOTATIONS:

APP. REVIEW:

APPROVED:

OPTION	GRADE	EARNED RATING	PREFERENCE	AUGM. RATING
63-1232	3	87	☐ 5 POINTS (TENT.)	
"	2	94	☐ 10 POINTS	
			☐ WIFE OR WIDOW	
			☐ DISAL.	
			☐ BEING INVESTIGATED	

INITIALS AND DATE: 5-18-50

15 (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? $ .... PER YEAR.
You will not be considered for any position with a lower entrance salary

(B) CHECK IF YOU WILL ACCEPT SHORT TERM APPOINTMENT IF OFFERED, FOR
☐ 1 TO 3 MONTHS ☐ 3 TO 6 MONTHS ☐ 6 TO 12 MONTHS

NOTE. Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment

(C) IF YOU ARE WILLING TO TRAVEL, SPECIFY
☐ OCCASIONALLY ☐ FREQUENTLY ☐ CONSTANTLY

(D) CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED:
☒ IN WASHINGTON, D. C. ☐ ANYWHERE IN THE UNITED STATES
☐ OUTSIDE THE UNITED STATES

(E) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS

16. EXPERIENCE It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, welfare, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.

(a) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

① PRESENT POSITION

DATES OF EMPLOYMENT (month, year) FROM   TO PRESENT TIME

EXACT TITLE OF YOUR PRESENT POSITION

CLASSIFICATION GRADE (If in Federal Service)

SALARY OR EARNINGS: STARTING, $ PER; PRESENT, $ PER

PLACE OF EMPLOYMENT (city and State)

NAME AND TITLE OF IMMEDIATE SUPERVISOR

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)

KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU

REASON FOR DESIRING TO CHANGE EMPLOYMENT

DESCRIPTION OF YOUR WORK

(CONTINUED ON NEXT PAGE)

16—43710-8

14-00000

8. CONTINUED

② DATES OF EMPLOYMENT (month, year)	EXACT TITLE OF YOUR POSITION	CLASSIFICATION GRADE (if in Federal service)	SALARY OR EARNINGS
FROM June '45 TO Sept '49	clerk		STARTING $ PER FINAL $ PER

PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR
Dayton Ohio - San Rae Gardens	Co-owner Ray F McKechnie
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person. If Federal, name department, bureau or establishment, and division)	**KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)**
Ray F McKechnie San Rae Gardens - Dayton O	Gift shop
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU	**REASON FOR LEAVING**
none	return to school

DESCRIPTION OF YOUR WORK

clerked in store
in charge of books

③ DATES OF EMPLOYMENT (month, year)	EXACT TITLE OF YOUR POSITION	CLASSIFICATION GRADE (if in Federal service)	SALARY OR EARNINGS:
FROM June '42 TO Sept '47			STARTING $ PER FINAL $ PER

PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR
Dayton Ohio Frigidaire	
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person. If Federal, name department, bureau or establishment, and division)	**KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)**
Frigidaire - Dayton O.	manufacture of Frigidaires
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU	**REASON FOR LEAVING**
none	return to school

DESCRIPTION OF YOUR WORK

worked on assembly line
worked in office of chemical laboratory

④ DATES OF EMPLOYMENT (month, year)	EXACT TITLE OF YOUR POSITION	CLASSIFICATION GRADE (if in Federal service)	SALARY OR EARNINGS:
FROM TO			STARTING $ PER FINAL $ PER

PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person. If Federal, name department, bureau or establishment, and division)	**KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)**
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU	**REASON FOR LEAVING**

DESCRIPTION OF YOUR WORK

14-00000

00023 MAY 10 '50

RECEIVED
MAY 10 1950
U.S.C.S.
B.P.P.R.

2601-16th St., N.W.
Washington, D.C.
May 9, 1950.

U.S. Civil Service Commission
Washington, D.C.

Dear Sir:

I sent in material for the unassembled exam for a Statistical Draftsman, the announcement number of which is 130.

I have moved since the date I sent in my paper. Would you please make the necessary changes so I will receive notice of my rating at my new address.

My old address was:
#722
2601 - 16th St., N.W.
Washington, D.C.

Ch. Address

My new address is:
San Rae Gardens
Dayton 7, Ohio R.R. #11

Thank you very much.

Sincerely,

Charlotte L. Zehrung

14-00000

UNITED STATES CIVIL SERVICE COMMISSION
RATING SHEET—RATING PROCEDURE NO. III
(Handbook X-105)

NAME OF APPLICANT	PREFERENCE	APPLICATION NO.
Charlotte L. Zabruno	☐ 5-PT. ☐ 10-PT. ☐ NONE	

POSITION TITLE	Statistical Draftsman GS-1533	POSITION TITLE	do
ANNOUNCEMENT NO.	U-130	ANNOUNCEMENT NO.	
QUALIFYING EXPERIENCE GRADE	GS-3	QUALIFYING EXPERIENCE GRADE	GS-2
BASIC RATING	85	BASIC RATING	90
ADDITIONAL POINTS	2	ADDITIONAL POINTS	4
EARNED RATING	87	EARNED RATING	94
VETERANS' PREFERENCE		VETERANS' PREFERENCE	
FINAL RATING		FINAL RATING	
EXAMINER	RLLK	EXAMINER	RLLK
DATE	5-18-50	DATE	5-18-50
REVIEWER		REVIEWER	
DATE		DATE	

COMMENTS:

POSITION TITLE		POSITION TITLE	
ANNOUNCEMENT NO.		ANNOUNCEMENT NO.	
QUALIFYING EXPERIENCE GRADE		QUALIFYING EXPERIENCE GRADE	
BASIC RATING		BASIC RATING	
ADDITIONAL POINTS		ADDITIONAL POINTS	
EARNED RATING		EARNED RATING	
VETERANS' PREFERENCE		VETERANS' PREFERENCE	
FINAL RATING		FINAL RATING	
EXAMINER		EXAMINER	
DATE		DATE	
REVIEWER		REVIEWER	
DATE		DATE	

COMMENTS

Education to be Substituted for Experience

High School

2 years	Mechanical Drawing
2 years	Art
1½ years	Algebra
1 year	Geometry
½ year	Trigonometry

College

1 year	4 credit hr. from [illegible] Experience in (Art)
1 year	6 credit hrs Statistics
	3 hrs/week lecture
	1½ hrs/week laboratory

Form 13
February 1946

UNITED STATES CIVIL SERVICE COMMISSION
PROOF OF RESIDENCE

Form approved
Budget Bureau Number 50-R050

Applications for appointment in the apportioned departmental service must be accompanied by a certificate showing legal or voting residence in the State or Territory claimed for at least one year next preceding the date of making application. Therefore, if you desire employment in the apportioned departmental service the following questions must be answered, and the Jurat and Officer's Certificate of Residence below must be executed. Failure to submit this form, properly executed, with your application may result in loss of consideration for appointment in the apportioned service. Applicants who now hold permanent positions in the apportioned departmental service are not required to have the Officer's Certificate of Residence executed but should write on it "Am in the apportioned service."

1. (First name) (Middle) (Maiden, if any) (Last)
Mr. / Mrs. / Miss Zehrung Charlotte L.

2. Name of examination: Statistical Draftsman

3. Street and number, or if Rural, R. D. number: 2601 16th St. N.W. #725

4. Option (if any):

Post office (including postal zone) and State: Washington, D.C.

5. Place and date of written examination (if any):

6. (a) In what State or Territory do you have— Legal residence: Ohio; or Voting residence: ......
(b) Length of such residence in State or Territory: From Jan 1929 to Feb. 1950 (Month) (Yr.) (Month) (Yr.)
(c) In what county do you have— Legal residence: Montgomery; or Voting residence: ......
(d) Length of such residence in county: From Jan 1929 to Feb. 1950 (Month) (Yr.) (Month) (Yr.)

7. If during the past year you have not resided continuously in the State or Territory in which you claim legal or voting residence, or are not now actually living in such State or Territory, indicate in the following blanks the dates of absences, and locations and occupations during such absences:

(a) Date left (Month, Year)	(b) Date returned (Month, Year)	(c) Location during absence (City and State)	(d) Occupation
Sept. '49	Dec. '49	Syracuse, N.Y.	student
Jan. '50		Washington, D.C.	[illegible]

8. If you are under 21 years of age, fill in the following blanks:
(a) Legal residence of parent or guardian — State ...... Is he a voter in that State? ☐ Yes ☐ No — County ......
(b) Length of such residence — From ...... 19.. to ...... 19.. (Month) (Yr.) (Month) (Yr.) — From ...... 19.. to ...... 19..
(c) Present post office address of parent or guardian — City or town ...... County ...... State ......

9. If you are a married woman, fill in the following blanks:
(a) Date of marriage
(b) Legal residence of husband — State ...... Is he a voter in that State? ☐ Yes ☐ No — County ......
(c) Length of such residence — From ...... 19.. to ...... 19.. (Month) (Yr.) (Month) (Yr.) — From ...... 19.. to ...... 19..

JURAT (OR OATH)

This jurat (or oath) must be executed before a notary public, the secretary of a United States civil service board of examiners, or other officer authorized to administer oaths for general purposes before whom the applicant must appear in person.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in answer to the foregoing questions are full and true to the best of my knowledge and belief.

If female, prefix "Miss" or "Mrs." and if married, use your own given name, as "Mrs. Mary L. Doe."

Signature of applicant: Charlotte L. Zehrung
(Sign your name in full—given name, initial or initials, and surname)

Sworn to before me according to law by the above-named applicant this 13th day of Feb. 1950
at [illegible] county of ...... and State (or Territory) of ......

NOTARY PUBLIC [illegible] WASHINGTON, D.C. (Signature of officer)
MY COMMISSION EXPIRES MARCH 31, 1954
(Official title)

OFFICER'S CERTIFICATE OF RESIDENCE

Instructions.—If the applicant's claim is based on legal residence, the certificate must be executed by a notary public, county, municipal, or police court clerk, mayor, justice of the peace, or other officer in the county or city in which the applicant claims residence. If the claim is based on voting residence alone, the certificate must be executed by the registrar of voters or other officer of the Board of Elections. In either case the officer must be an actual resident and officer in the city or county claimed by the applicant, and the certificate must bear his official seal, or, in lieu thereof, certification of his official character by the proper officer under official seal.

The applicant is not required to appear in person before the officer who executes this certificate, but the officer should satisfy himself from credible and competent evidence as to facts to which he certifies.

I, a Notary (Official designation of Officer) of the county of Montgomery and State (or Territory) of Ohio
do hereby certify that Charlotte L. Zehrung (Write name to agree exactly with applicant's name as given above) the applicant who desires the above in connection with a civil service examination,
is now a Legal (Specify whether "legal," "voting," or "legal and voting") resident of the county of Montgomery, and State (or Territory)
of Ohio and has been such resident for 21 years 1 months next preceding the date hereof.

Dated at West Carrollton, county of Montgomery, and State (or Territory)
of Ohio, this 14th day of February 1950

[OFFICIAL SEAL]
My commission expires July-19-1952

Clarence H. Bloss, (Signature of officer)

The Official seal must not be omitted. If erasure or correction is made in the "Officer's Certificate," certification must be made on margin by the officer who executes the certificate, showing such correction.

U. S. GOVERNMENT PRINTING OFFICE 16—[illegible]

Index Numbe[illegible] Retail Cost of all Foods and of Four Selected Commodities 1923 - 1940

FORM 1

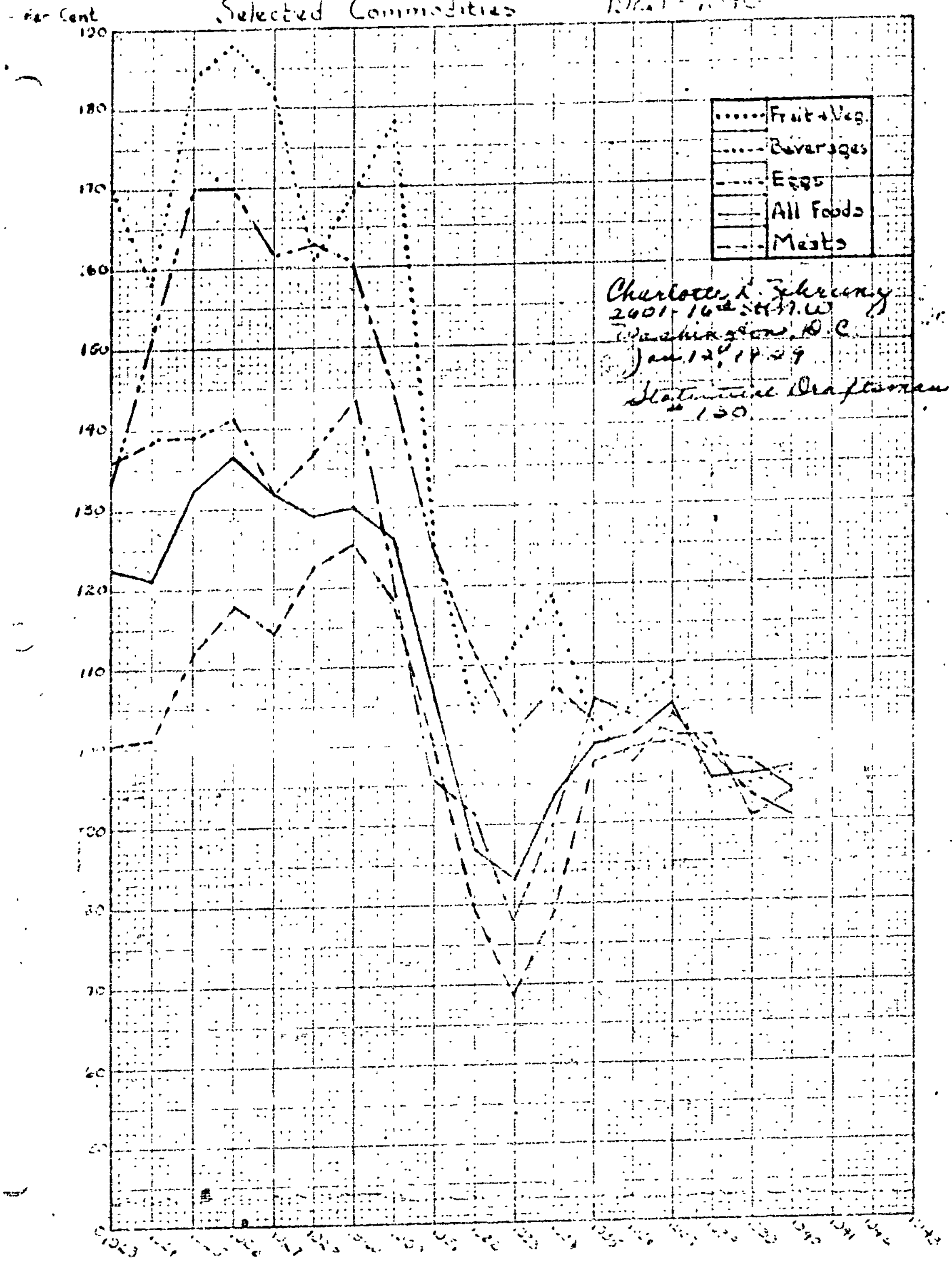
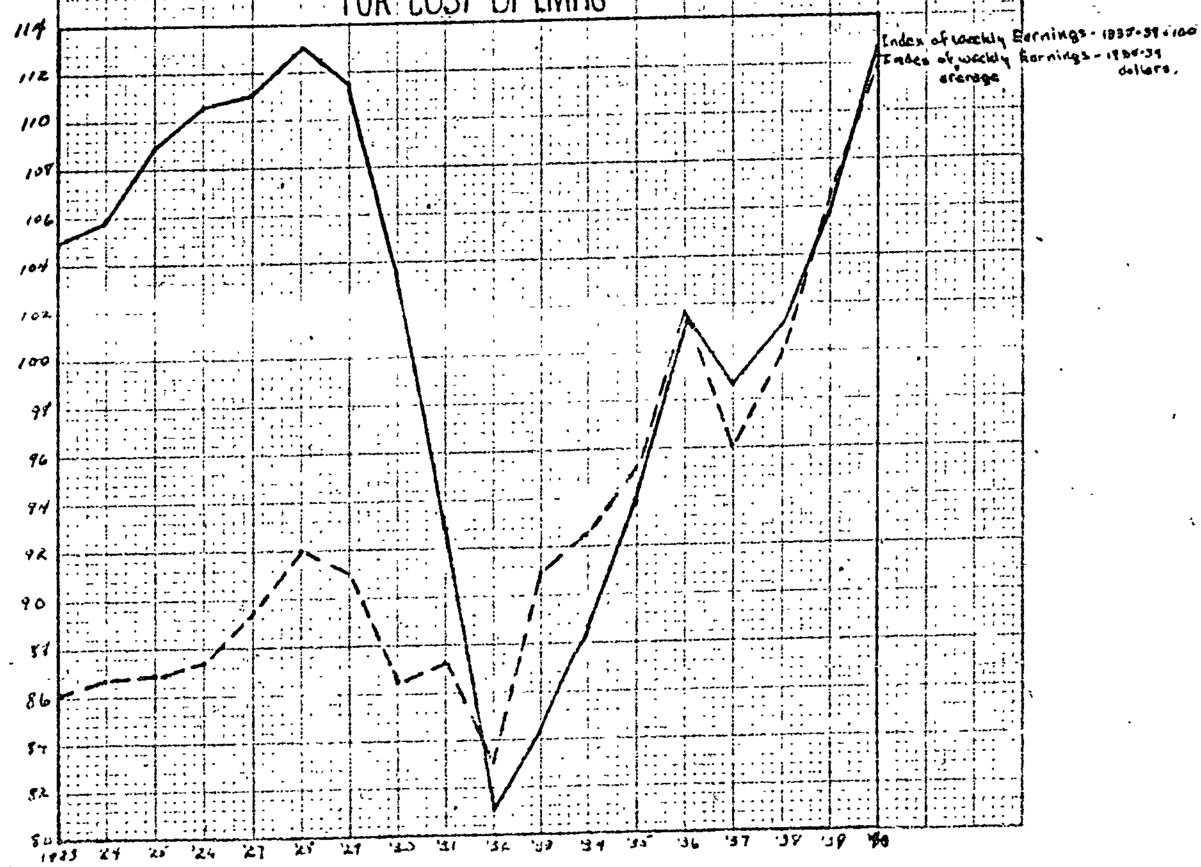
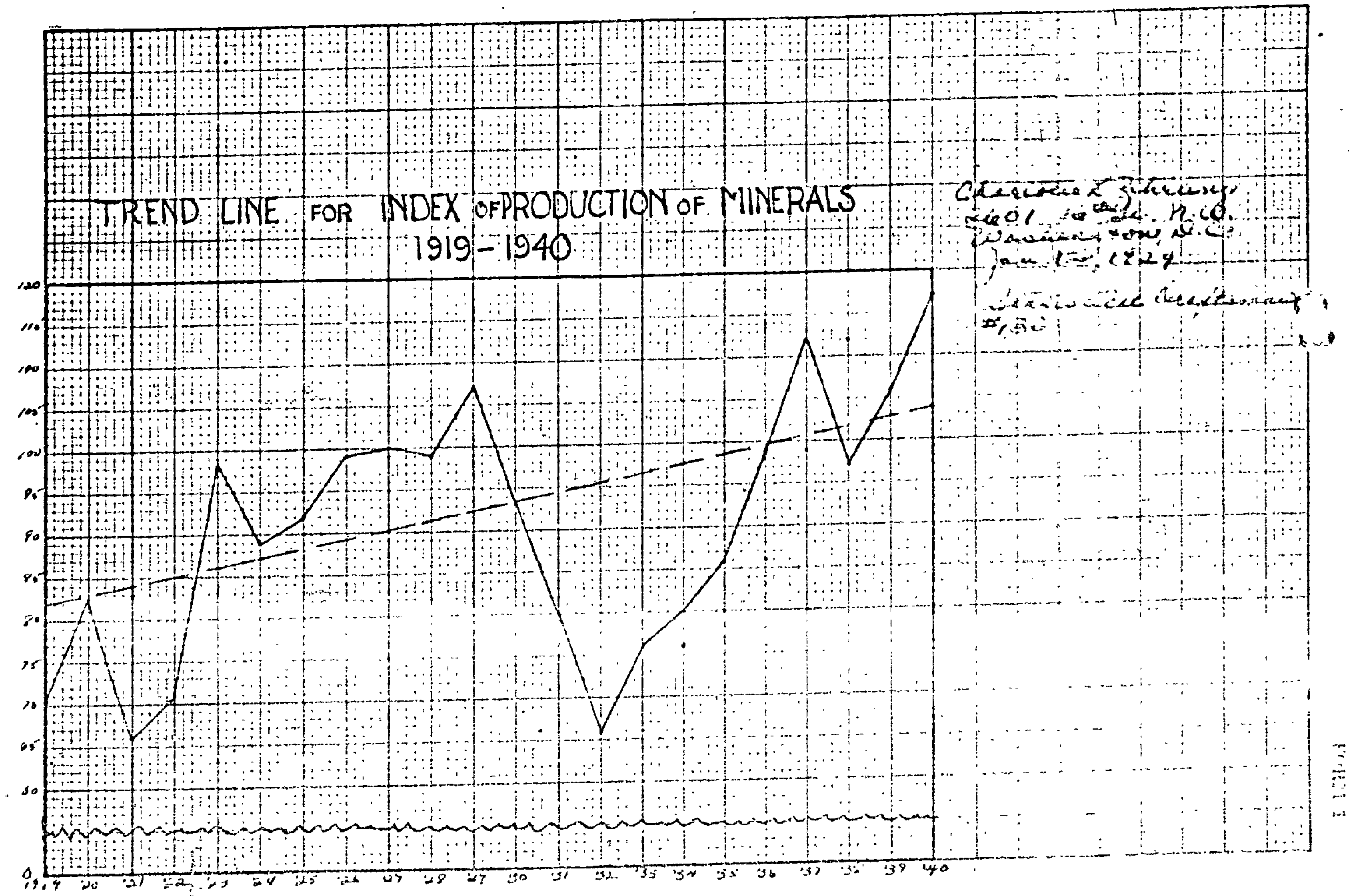


FIGURE 1

Charlotte L. [illegible]
2601 16th St. N.W.
Washington, D.C.
Jan. 12, 19[illegible]
Statistical Draftsman
#130

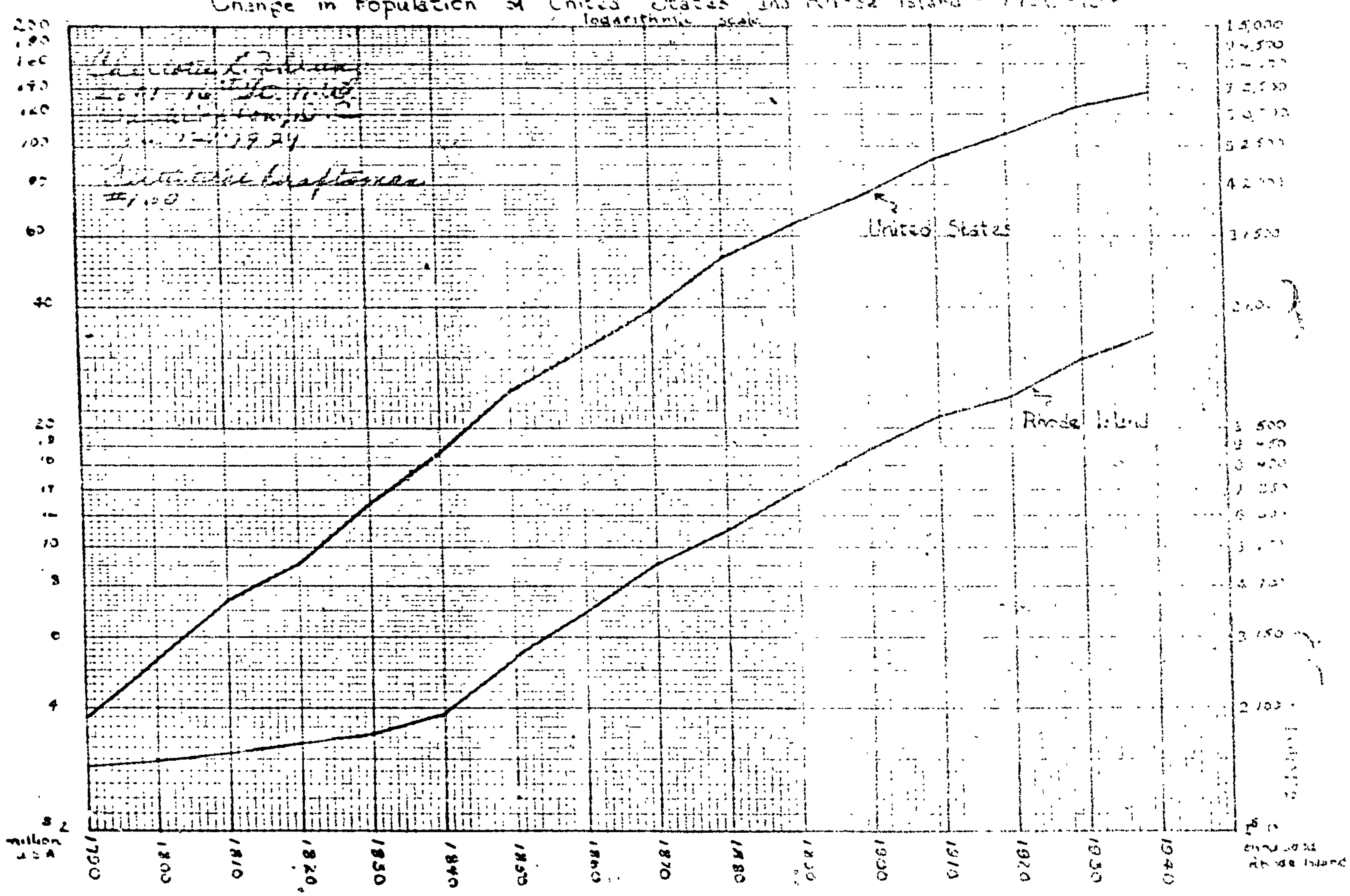
INDEX OF WEEKLY EARNINGS BEFORE AND AFTER ADJUSTMENT FOR COST OF LIVING





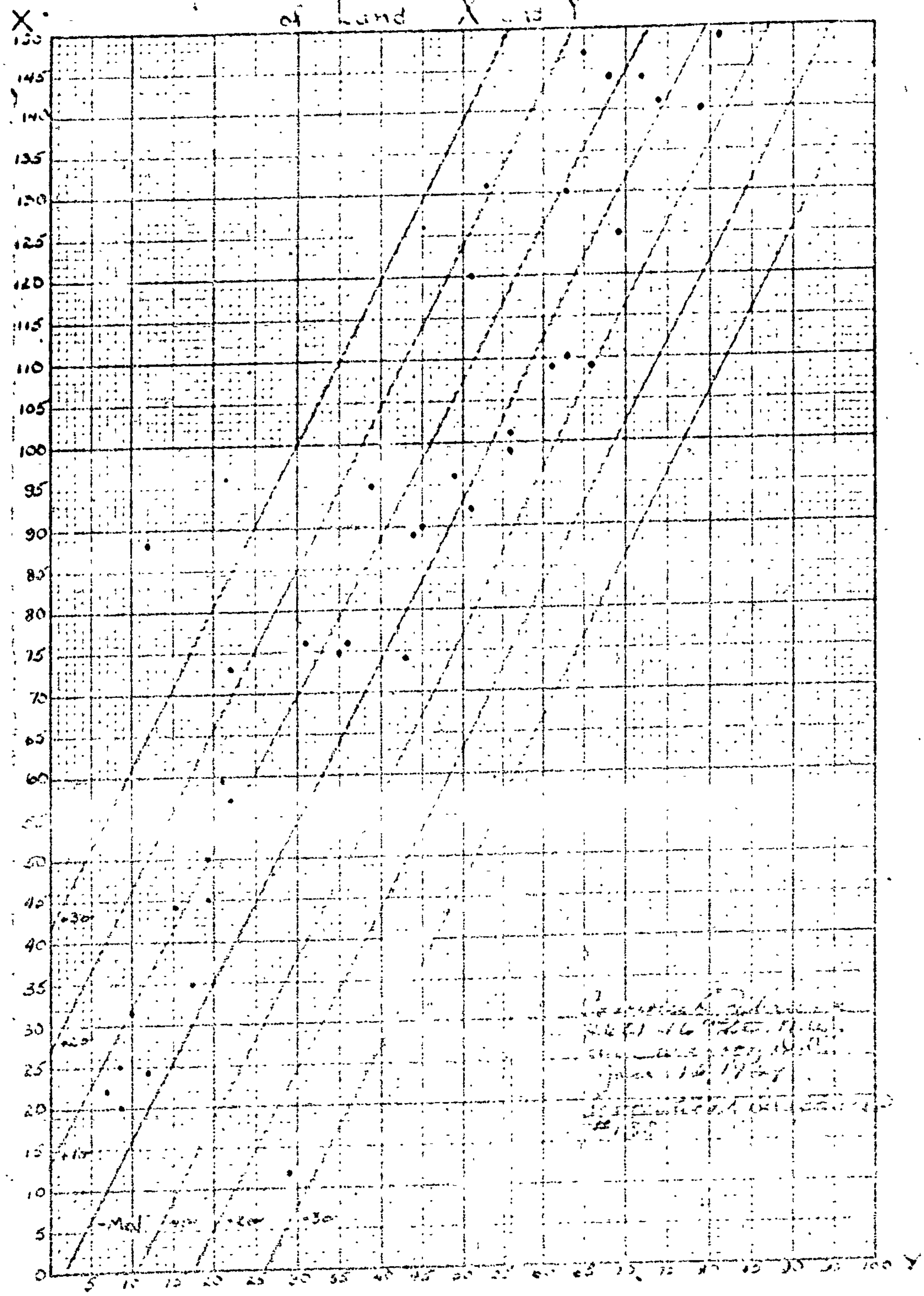
x = 6 mo.
origin 1929 - 1930.

Change in Population of United States and Rhode Island - 1790-1940



Scatter Diagram ... Relationship Between value of Land X and Y

FORM 1



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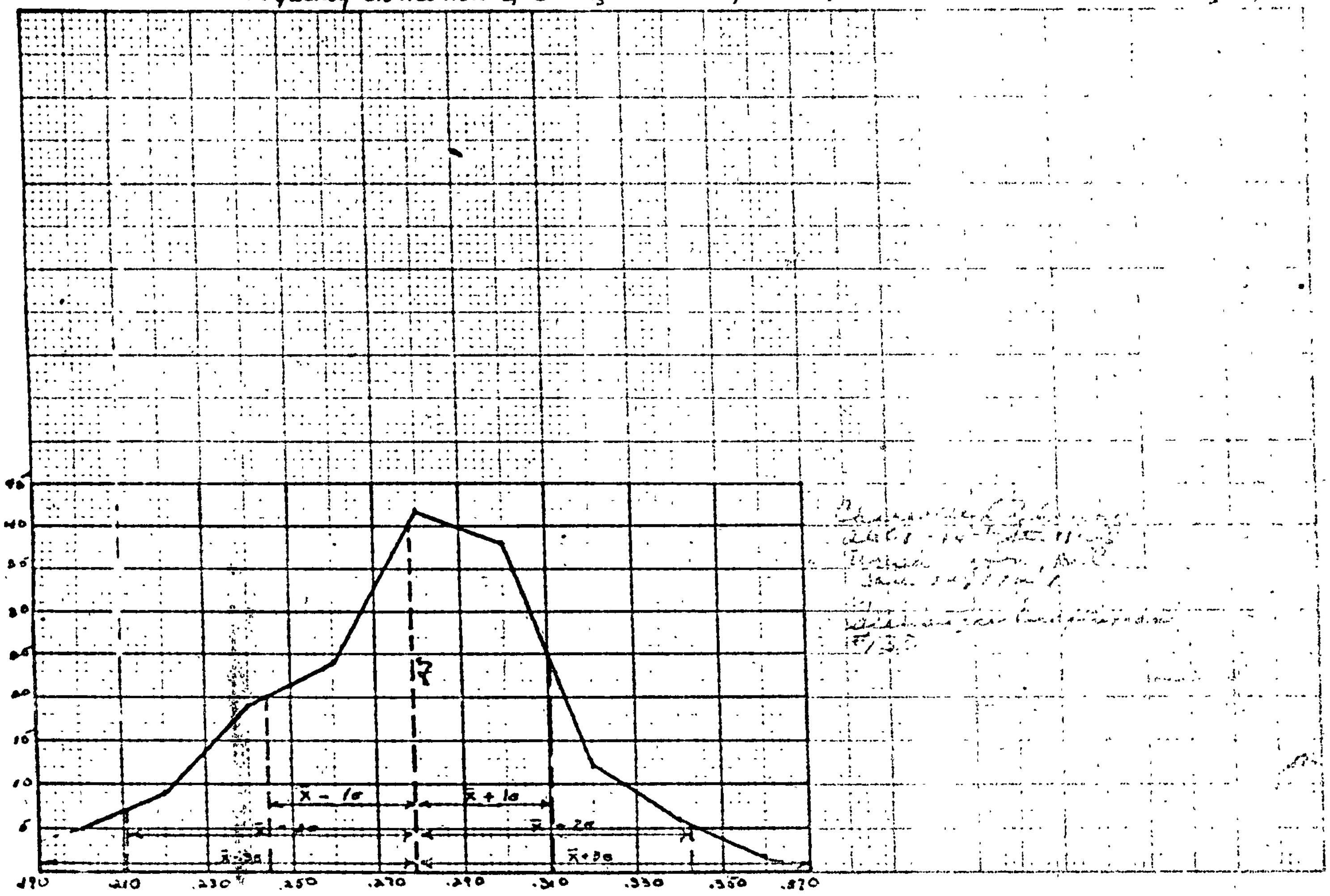
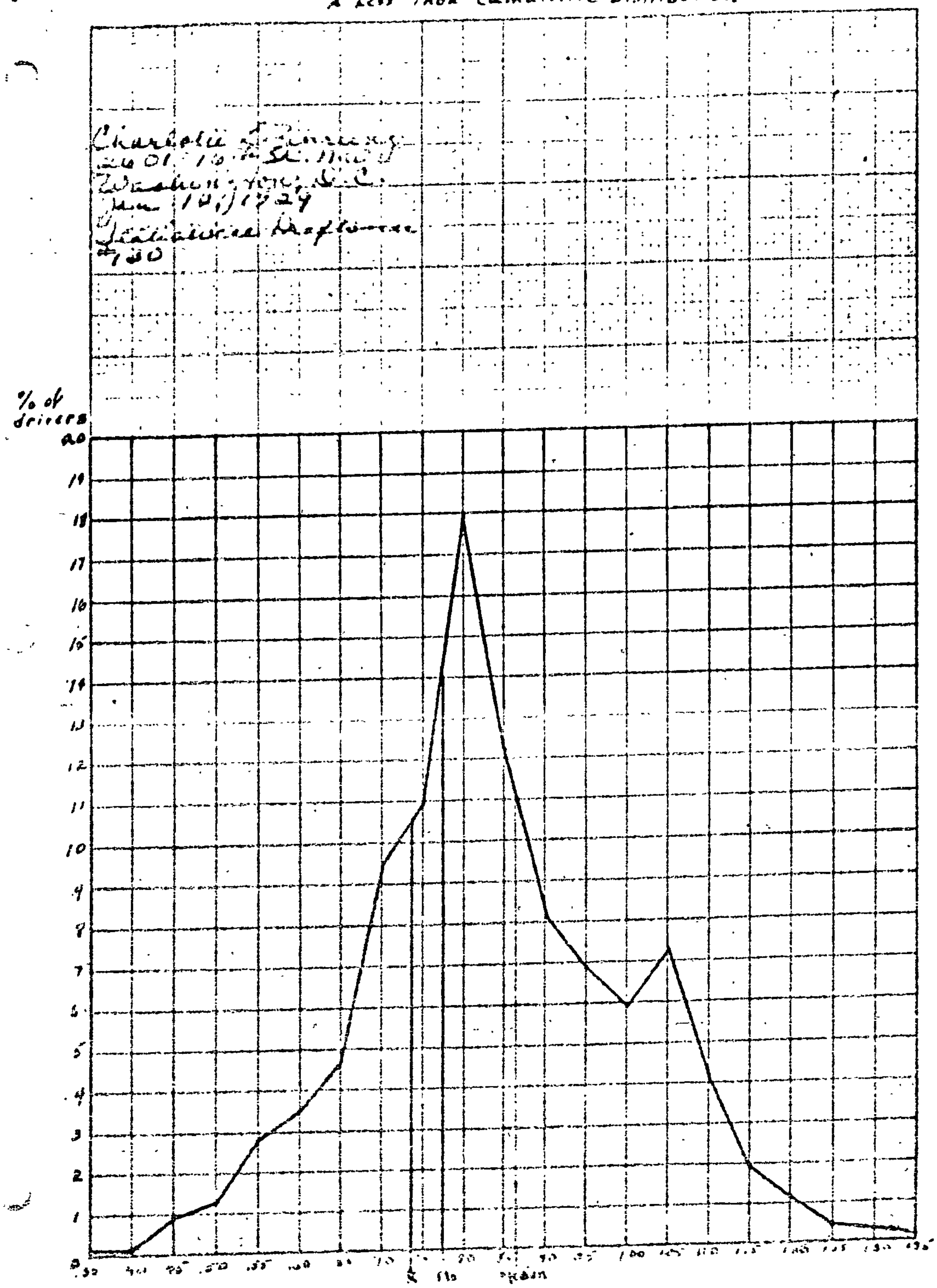
Frequency Distribution of Batting Records of 157 Regular American and National Leagues, 1946

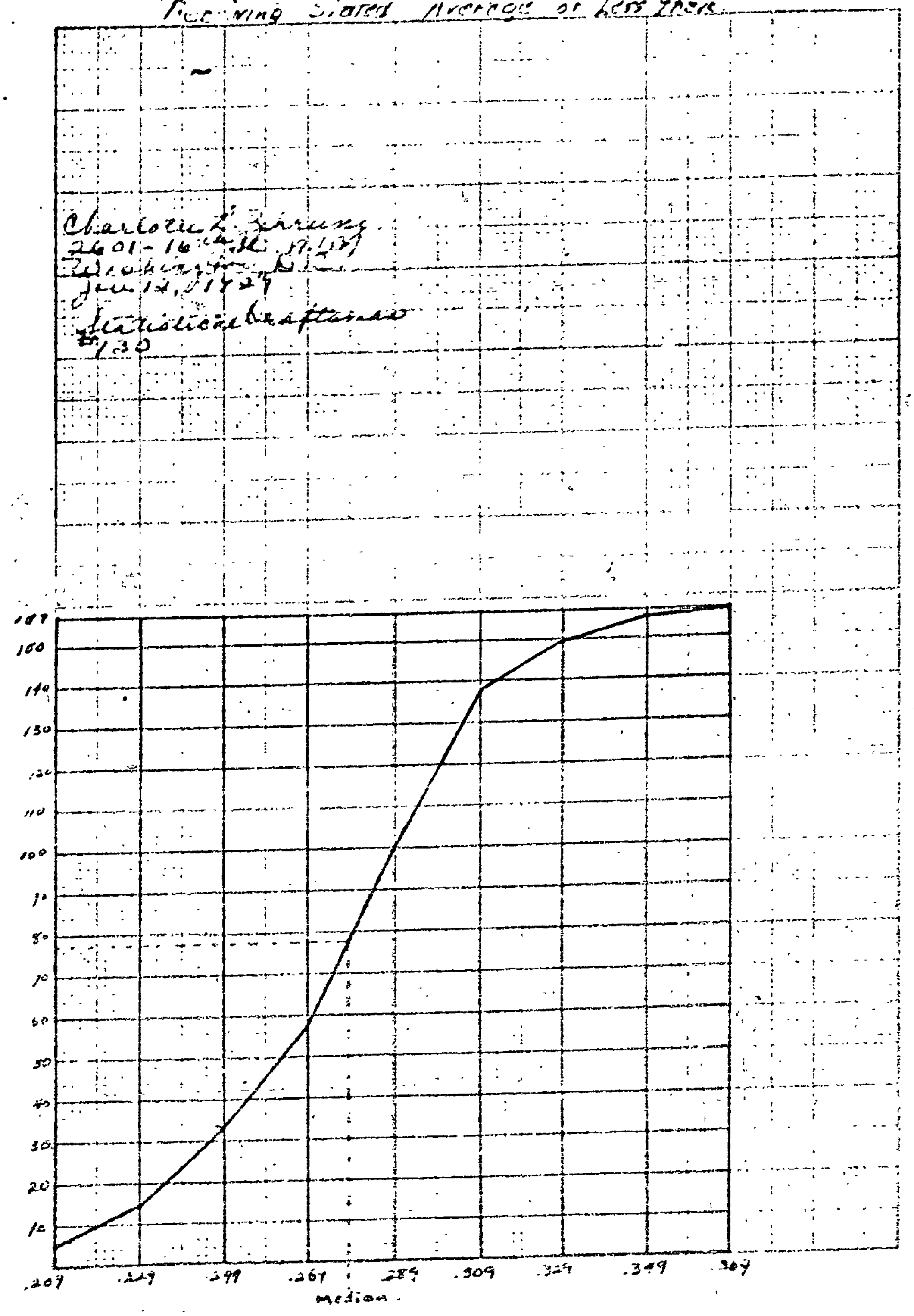


Cumulative Distribution of Hourly Rates of Wages of %'s of Union Motor Truck Drivers - June 1, 1940

A Less than Cumulative Distribution

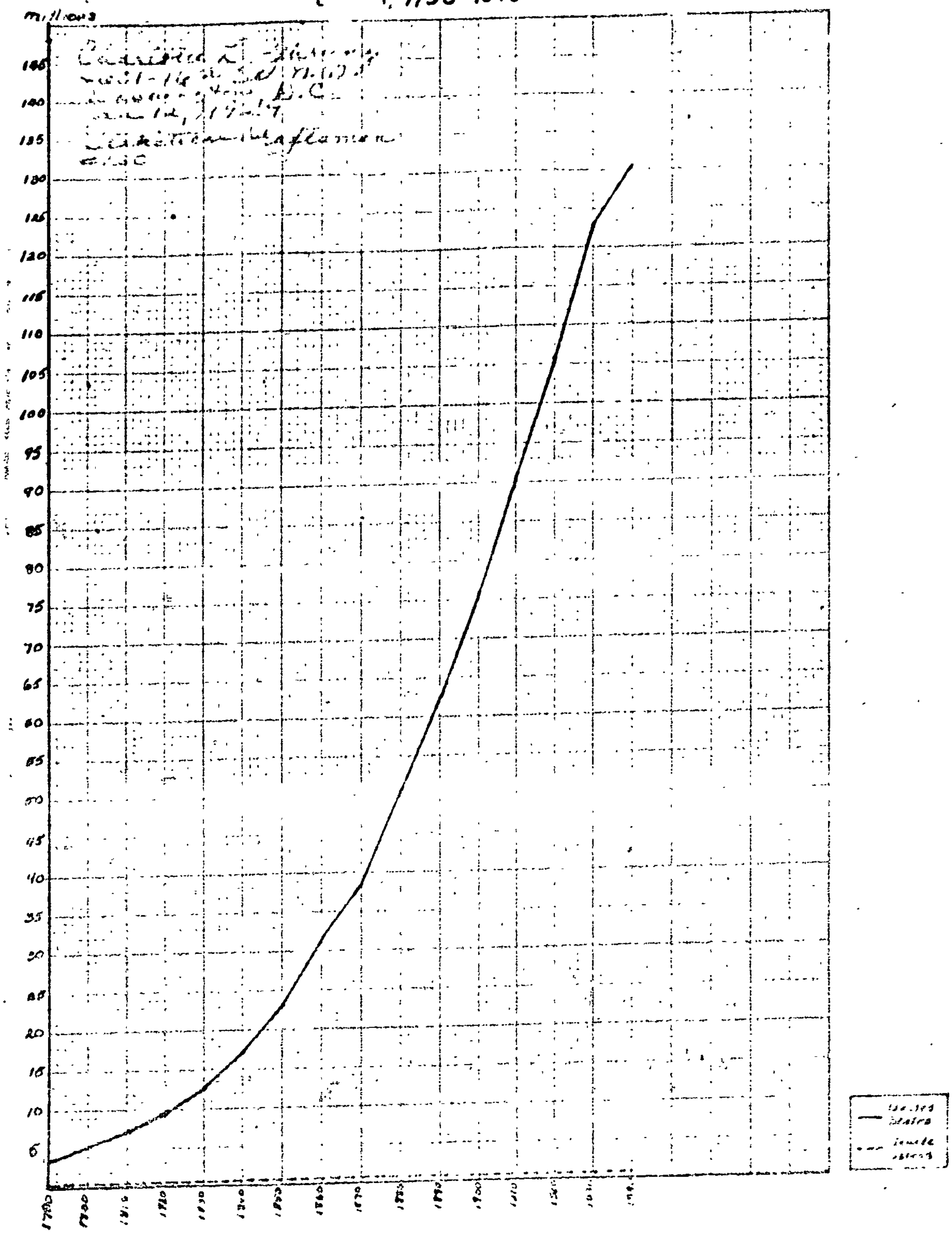


Cumulative Distribution of Batting Averages 1940 of American and National Leagues - 151 Regular Players Receiving Stated Average or Less Than.



14-00000

Population of Continental United States and Rhode Island ( ), 1790-1940



(5) DATES OF EMPLOYMENT (month, year) FROM: TO | EXACT TITLE OF YOUR POSITION | CLASSIFICATION GRADE (if in Federal service) | SALARY OR EARNINGS STARTING $ PER; FINAL $ PER

PLACE OF EMPLOYMENT (city and State) | NAME AND TITLE OF IMMEDIATE SUPERVISOR

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person. If Federal, name department, bureau or establishment, and division) | KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacture of locks, etc.)

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU | REASON FOR LEAVING

DESCRIPTION OF YOUR WORK

If more space is required, use a continuation sheet (Standard Form No. 58) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

17. MILITARY TRAINING In the space below, describe any training received in the Armed Services (not already listed under Item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service schools you attended is especially important. (Extra pages may be used to give full descriptions.)

DATES FROM	DATES TO	LOCATION	DESCRIPTION OF TRAINING

18 EDUCATION (Circle highest grade completed): 1 2 3 4 5 6 7 8 9 10 11 12

MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION OF
[✓] ELEMENTARY SCHOOL [✓] JUNIOR HIGH SCHOOL [✓] SENIOR HIGH SCHOOL

(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED

(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED

(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY	MAJOR AND SPECIALTY	DATES ATTENDED FROM	DATES ATTENDED TO	YEARS COMPLETED DAY	YEARS COMPLETED NIGHT	DEGREES CONFERRED TITLE	DEGREES CONFERRED DATE	SEMESTER HOURS CREDIT
Syracuse University, Syracuse, N.Y.	Economics	Sept '46	Jan '50			BA	Jan 1950	112
Univ. of Guatemala	Span	June '49	July '49					5

(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS | SEMESTER HOURS | LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS | SEMESTER HOURS

(E) OTHER TRAINING, SUCH AS VOCATIONAL, BUSINESS, STUDY COURSES GIVEN THROUGH THE ARMED FORCES INSTITUTE (show name and location of schools) OR IN-SERVICE TRAINING IN PUBLIC OR PRIVATE EMPLOYMENT | SUBJECTS STUDIED | DATES ATTENDED FROM | TO | YEARS COMPLETED DAY | NIGHT

19 INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES | READING | SPEAKING | UNDERSTANDING

Language	Reading	Speaking	Understanding
Spanish	✓	✓	✓
French	✓		

22 ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)?
[ ] YES [ ] NO GIVE KIND OF LICENSE AND STATE:
FIRST LICENSE OR CERTIFICATE (YEAR)
LATEST LICENSE OR CERTIFICATE (YEAR)

20 IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRIES, INDICATE (1) NAMES OF COUNTRIES (2) DATES AND LENGTH OF VISIT (3) REASON OR PURPOSE (e.g., military service, business, education, recreation)
Mexico - 1mo - recreation
Guatemala - 2mo - education

23 GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS (1) YOUR MOST IMPORTANT PUBLICATIONS (do not submit copies unless requested) (2) YOUR PATENTS OR INVENTIONS (3) PUBLIC SPEAKING AND PUBLICATIONS EXPERIENCE (4) MEMBERSHIP IN PROFESSIONAL OR SCIENTIFIC SOCIETIES, ETC. (5) HONORS AND FELLOWSHIPS RECEIVED

21 LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES
calculator
APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 55 SHORTHAND

24. REFERENCES. List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 16 (EXPERIENCE).

FULL NAME	PRESENT BUSINESS OR HOME ADDRESS (Give complete current address, including street and number)	BUSINESS OR OCCUPATION
1. Mr. Harry Schwartz	113 Ramsey Ave Syracuse NY	teacher
2. Miss Theodosia Moran	Cazenovia N.Y. R.D. #2	teacher
3. Mr. Herbert Hauldermen	11 Winding Way, Dayton, O	Personnel Frigidaire

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
25. MAY INQUIRY BE MADE OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC.?		
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	✓	
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY, U. S. A., OR ANY COMMUNIST ORGANIZATION?		✓
28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?		✓
29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR OF AN ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?		✓
If your answer to question 27, 28, or 29 above is "yes," state in Item 39 the names of all such organizations, associations, movements, groups, or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein.		
30. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF $25 OR LESS WAS IMPOSED)? *If your answer is "Yes," list all such cases under Item 39 below. Give in each case (1) the date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.*		✓
31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? *If your answer is "Yes," give in Item 39 the name and address of employer, date, and reason in each case.*		✓
32. HAVE YOU EVER BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS? *If your answer is "Yes," give dates of and reasons for such debarment in Item 39.*		✓
33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? *If your answer is "Yes," give complete details in Item 39 so that consideration can be given to your physical fitness for the job.*		✓
34. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? *If your answer is "Yes," give complete details in Item 39.*		✓
35. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? *If your answer is "Yes," give details in Item 39.*		✓
36. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS (BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? *If your answer is "Yes," show in Item 39 for EACH such relative (1) full name; (2) present address; (3) relationship; (4) Department or Agency by which employed; and (5) kind of appointment.*		✓

SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE

A. If you are claiming preference as a **PEACETIME VETERAN** who has been awarded a campaign badge or service ribbon, or as a **DISABLED VETERAN**, or as the **WIFE OF A DISABLED VETERAN**, or as the **WIDOW OF A WAR OR CAMPAIGN VETERAN**; attach Veteran Preference Claim, CSC Form 14, together with proof specified therein.

B. If you are a **WAR-TIME VETERAN** not claiming disability preference, you should NOT submit your discharge with this application. Preference will be tentatively credited to you and if appointed, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in time of war.

	YES	NO
37. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR?		✓
(B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION?		
(C) WAS SERVICE PERFORMED ON AN ACTIVE FULL TIME BASIS WITH FULL MILITARY PAY AND ALLOWANCES?		

(D) DATE OF ENTRY OR ENTRIES INTO SERVICE	DATE OF SEPARATION OR SEPARATIONS
BRANCH OF SERVICE (Army, Navy, Marine Corps, Coast Guard, etc.)	SERIAL NO. (If none, give grade or rating at time of separation).

	YES	NO
38. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING PEACETIME ONLY, DID YOU PARTICIPATE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON?		
(B) ARE YOU A DISABLED VETERAN? *If so, and you have not listed your disability in answer to Item 33, explain in Item 39 below.*		✓
(C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED?		✓
(D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE-CONNECTED DISABILITY WHICH DISQUALIFIES HIM FOR CIVIL SERVICE APPOINTMENT?		✓

THIS SPACE FOR USE OF APPOINTING OFFICER ONLY

The information contained in the answers to Question 37 above has been verified by comparison with the discharge certificate on .... 19......

Agency: .... Title: ....

39. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (indicate item numbers to which answers apply)

ITEM NO.		ITEM NO.	

If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

Before signing this application check back over it to make sure that you have answered ALL questions correctly.

I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80).

SIGNATURE OF APPLICANT Charles L. Zehner

(Sign your name in INK (one given name, initial or initials, and surname). If female, prefix Miss or Mrs. and if married use your own given name as "Mrs. Mary L. Doe")